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1984 COTH SURVEY OF HOUSESTAFF STIPENDS, BENEFITS, AND FUNDING

January 1985

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TABLE OF CONTENTS

	Page
List of Tables	iv
Introduction	viii
Chapter I: Housestaff Stipends	
Nationwide Data	1
Regional Variations	2
Affiliation Relationships	2
Hospital Ownership	3
Bedsize Groupings	3
Atypically Large Stipend Increases and Decreases	3
City Data	4
Clerkship Applications	5
Changes in Residency Programs	5
Chapter II: Housestaff Benefits and Policies	
Health Benefits	69
Non-Health Benefits	70
Chapter III: Housestaff Funding	
Hospital Expenditures	91
Sources of Funds	91
Appendix A: Questionnaire for 1984 COTH Survey	109
Appendix B: Response Rate for 1984 Survey	111
Appendix C: Dollar and Percentage Increases for First-Year Housestaff	112
Appendix D: Changes in Residency Programs	113
Appendix E: Ratios of Residents to Beds	119
Appendix F: Ratios of Post-M.D. Trainees to Beds	120
Appendix G: Minorities as a Percentage of Total Residents	121
Appendix H: Minorities as a Percentage of Total Residents and Fellows	122
Appendix I: Map of COTH Regions	123

LIST OF TABLES

Table	Subject	Page
	CHAPTER I	
	HOUSESTAFF STIPENDS	
	NATIONWIDE:	
1	Nationwide Stipends	7
2	Mean and Median Stipend Increases Nationwide by Year of Training	8
3	Index Values	9
4	Analysis of Cohort of Residents	10
	GEOGRAPHIC REGION:	
5	Comparison of Median Stipends	11
Fig. 1	Six Year Comparison of Median Salary Data	12
6	Northeast	13
7	South	14
8	Midwest	15
9	West	16
10	Mean and Median Stipend Increases by Region	17
	AFFILIATION RELATIONSHIPS:	
11	Comparison of Median Stipends	18
Fig. 2	Six Year Comparison of Median Salary Data	19
12	University-Owned	20
13	Major Affiliate	21
14	Limited Affiliate	22
15	Mean and Median Stipend Increases by Affiliation	23
	HOSPITAL OWNERSHIP:	
16	Comparison of Median Stipends	24
Fig. 3	Six Year Comparison of Median Salary Data	25
17	State-Owned	26
18	Municipally-Owned	27
19	Church-Owned	28
20	Other, Nonprofit	29
21	Veterans Administration	30
22	Mean and Median Stipend Increases by Hospital Ownership	31

Table	Subject	Page
	HOSPITAL BED SIZE:	
23	Comparison of Median Stipends	32
24	399 of Fewer Beds	33
25	400-549 Beds	34
26	550-699 Beds	35
27	700 or More Beds	36
28	Mean and Median Stipend Increases by Hospital Bed Size	37
29	More Than A Seven Percent Increase in Stipends for 1984-85	38
30	Less Than A Three Percent Increase in Stipends for 1984-85	39
31	No Increase or a Decrease in Stipends for 1984-85	40
	CITIES:	
32	Mean First Year Stipend Indexed to National Mean	41
33	Akron-Youngstown-Canton	42
34	Baltimore	43
35	Boston	44
36	Chicago	45
37	Cincinnati	46
38	Cleveland	47
39	Dallas	48
40	Detroit	49
41	District of Columbia	50
42	Hartford	51
43	Houston	52
44	Indianapolis	53
45	Long Island	54
46	Los Angeles	55
47	Milwaukee	56
48	Newark	57
49	New York City	58
50	Philadelphia	59
51	Pittsburgh	60
52	Providence	61
53	San Francisco	62
54	Seattle	63
55	St. Louis	64
56	All Other Cities	65

Table	Subject	Page
	CLERKSHIP APPLICATIONS:	
57	Hospitals Accepting Clerkship Applicants from Non-LCME	66
58	Hospitals Requiring Clerkship Fee by Affiliation Status	67
	CHAPTER II	
	HOUSESTAFF BENEFITS	
	HEALTH BENEFITS PROVIDED:	
59	Nationwide	73
60	Geographic Region	74
61	Affiliation Relationship	75
62	Ownership	76
63	Bed Size	77
64	Hospital Contribution to Health Insurance Premium	78
	NON-HEALTH BENEFITS:	
65	Nationwide	79
66	Geographic Region	80
67	Affiliation Relationship	81
68	Bed Size	82
69	Ownership	83
70	Provision of Meals	84
71	Annual Vacation Provided to First Year Housestaff	85
72	Annual Vacation Provided to Second Year Housestaff	86
73	Time Allotted House Officers for Attending Seminars	87
74	Hospitals Allowing Additional Time Off for Seminars	88
75	Hospitals Providing Benefits by a Fee Discount System	89
	CHAPTER III	
	HOUSESTAFF FUNDING	
	AVERAGE HOSPITAL EXPENDITURES:	
76	Average Expenditures for Residents	93
77	Average Expenditures for Clinical Fellows	94

Table	Subject	Page
	FUNDING SOURCES:	
78	Residents' Stipends and Benefits as a Percentage	95
79	Ratio of Fringes to Stipends for Residents	96
80	Ratio of Fringes to Stipends for Clinical Fellows	97
81	Nationwide, Excluding VA	98
Fig. 4	Residents Stipends and Benefits	99
Fig. 5	Clinical Fellows Stipends and Benefits	100
82	University-Owned	101
83	Major Affiliate	102
84	Limited Affiliate	103
85	State-Owned	104
86	Municipally-Owned	105
87	Church-Owned	106
88	Other, Nonprofit	107

Introduction

This report is the sixteenth annual publication of the results of the Association of American Medical Colleges' (AAMC) Survey of Housestaff Stipends, Benefits, and Funding. The questionnaire (Appendix A) was sent to all 433 members of the Council of Teaching Hospitals (COTH) in April, 1984. Complete or partial responses were received from 355 member hospitals, an 82 percent response rate. The distribution of these responses appears as Appendix B.

The purpose of the survey is to provide comparative data and analyses of average housestaff stipends paid in 1983-84, the reported stipends for 1984-85, and the benefits provided to residents and dependents. Total hospital expenditures for housestaff stipends and benefits are displayed, as well as analyses of the sources of that funding. All data are aggregated by region, hospital affiliation, ownership, and bedsize.

There are some changes to this year's report which are explained in the text. In brief, three new tables were added to display atypical increases and decreases in first-year stipends. Also, the tables reflecting median dollar and percentage increases for first-year stipends have been modified using a different statistical method. As was done last year, the appendices contain information on reported resident-to-bed ratios and minority resident distribution.

This publication is the product of many individuals. Janie Bigelow not only entered all data and typed the entire manuscript, but through her quick wit and careful concern assisted in its development. Exequiel Sevilla III of the AAMC's Computer Services provided analytical expertise together with expert counsel. His initiatives and modifications were important in the formation of the report. The Department of Teaching Hospitals' professional staff, Dick Knapp, Jim Bentley, and Nancy Seline were invaluable in their constructive review and comments. This survey is, therefore, a composite work of many dedicated individuals. Their time, and the cooperation of all the participating hospitals is appreciated.

Karen Pfordresher
Department of Teaching Hospitals

CHAPTER I

HOUSESTAFF STIPENDS

NATIONWIDE DATA (Tables 1-4)

Data from the 1984 survey continue a trend, evident for the past four years, of lessening the annual increase in resident stipends. Table 1 illustrates that the national mean stipend for first year residents for 1984-85 increased by 4.5 percent to $20,808. As presented in Table 2, this equates to a mean dollar increase of $889. Increases for following years of residency are 4.3 percent for the second year, 4.2 percent for the third, the fourth year by 4.1 percent, and the fifth and sixth year national mean increased by 4.0 percent. The overall trend in a reduction in the first year rate of increase can be traced to 1981-82, when the increase was 8.0 percent or more for each of the six years. In 1982-83, increases were approximately 7 percent for the first through the fifth year and 6.7 percent for the sixth year stipend. A significant change occurred in 1983-84 when the national mean stipend for the first residency year increased 4.8 percent, with all other residency training years following suit. This change in the rate of increase in stipend levels will be further explored in this report (Tables 29-31). Appendix C illustrates the increase in first post-MD year stipends from 1969-70 to the present time.

"Index values" comparing stipend level increases from the second through the sixth post-MD years appear in Table 3. These figures show only a slight (.01 percent) decrease from 1983-84 data for the fifth and sixth year median value, and a consistent pattern overall of approximately a 6 percent increase in residency stipends for each additional year of training.

Table 4 follows the increase in stipends for a cohort of matriculating residents, and illustrates each potential increase in stipend level. For example, a second year resident in 1983-84 would receive a $2,172 mean increase upon entrance into the third year of the training program, or a total step and base stipend increase of 10.2 percent increase.

Consideration of changes in stipend support should recognize the fact that 88.1 percent of medical school graduates have some level of indebtedness upon graduation. The AAMC Annual Survey of Medical School Graduates reported an average debt obligation of indebted graduates to be $26,496 for 1984, or 127.34 greater than the nationwide mean stipend of $20,808.

Please note that all data in this report, with the exception of Appendix C, are based on responses to the current survey and therefore may differ slightly from the projections reported last year. In addition, five tables in this report were developed with a statistical methodology differing from previous years. Tables 2, 10, 15, 23, and 29 display mean and median comparisons of 1984-85 to 1983-84 housestaff stipend increases. This new method yields a median figure that is not directly comparable to those reported in previous years. Using the old method of computation, we would have first computed the median of all 1983-84 payments and the median of all 1984-85 payments, then taken the difference between these two medians.

This figure would have been reported as a difference between the medians. The new method yields a median of differences. It is computed in the following way: first, the difference between 1983-84 payments and 1984-85 payments is computed for each hospital. For first-year stipends, these differences range from -$314 to $2,957. Then the median of these differences is computed. A parallel method is used to determine the median of the differences in percentage increases. In the case of municipally-owned hospitals, using the old computation method, the median increases would have been $0 and 0 percent. Using the new computation method, the median increase is reported as $900 and the median percentage increase is 4.5 percent. Because other tables depict the difference median figures for both years, it is hoped that displaying the median of the differences would further clarify median stipend comparisons.

REGIONAL VARIATIONS (Tables 5-10)

Data from reporting institutions are analyzed by geographic region, affiliation relationship, hospital ownership, and bedsize. Table 5 compares median reported housestaff stipends by region for 1984-85 by total dollars and as a percent of the nationwide median. As in the past, the Southern region reports the lowest stipend level; the Northeast the highest. Figure 1 illustrates six-year comparison of median stipends by region for first year housestaff.

Also included in Table 5 is a regional comparison by percent of nationwide median. The table illustrates a consistent pattern in the Southern region of stipends below the national median for all six post-MD years. On the other hand, while the Midwestern region reports stipends above the national median for the first year, stipends slip below the national figure for the following five years, while the reverse is true for the Western region.

Table 10 illustrates the percentage increase by region. Again, the Northeast shows the largest increase in the mean stipend, 5.1 percent, but the South supplanted the West in providing the smallest percentage increase in housestaff stipends, with a 3.7 percent average. (Last year and the year previous, Western region residents received the smallest percentage increase in stipend levels.)

AFFILIATION RELATIONSHIPS (Tables 11-15)

The analyses by affiliation are based on the institutions' relationship to the medical schools as reported in the COTH Directory of Educational Programs and Services. Three groups are designated as follows: university-owned, major affiliate, and limited affiliate. The definitions for affiliation are derived from the Accreditation Council for Graduate Medical Education's Directory of Residency Programs, but this survey separately identifies the university-owned institutions from other major affiliations, and merges the ACGME categories of "limited", "graduate", and "unaffiliated" under the COTH term "limited affiliate."

These groupings help to illustrate relationships between intensity of affiliation and level of stipend offered. Data show that the more intense the relationship (i.e., university-owned) the lower the stipend level comparatively. The mean stipend for first year residents in a hospital with a limited affiliation is $21,315, compared with $19,780 for a resident in a

university-owned hospital. This 7.5 percent difference reflects an increase from the 5.7 percent differential evident for the same group in 1983-84. Figure 2 illustrates this trend. It is important to remember that university-owned hospitals have a higher proportional response rate to this survey, and that a majority of the university-owned respondents are also state-owned institutions, which commonly pay lower stipends. Major affiliates show the smallest percentage increase, as was the case in 1983-84.

HOSPITAL OWNERSHIP (Tables 16-22)

The categories used to distinguish hospital ownership are as follows: state-owned, municipally-owned (including county, city and district hospitals), church-owned, other non-profit, and Veterans Administration hospitals. Other non-profit hospitals report the largest, and state-owned hosptials the smallest mean stipend increase. Last year the state- and municipally-owned hospitals' average stipend increase was $1,000 less than the other three groups, but the gap narrowed this year. Another change in the direction of increase by hospital ownership, compared to 1983-84 figures, is in the computed median for state-owned and VA hospitals. In the 1983-84 report, state-owned median increases were the smallest, at 3.8 percent; and VA hospitals reported the greatest increase, at 5.8 percent. In the current report, an apparent reversal shows state-owned median increases at 5.0 percent and VA median increases were reported to be 4.0 percent. The percentage increase for state-owned hospitals were the largest for all ownership categories in the first year, even though their stipend levels remain the lowest compared to other hospitals. Although an interesting reversal, to some extent the differences could be due to the change in the methodology used to compute the table this year.

BEDSIZE GROUPINGS (Tables 23-28)

The bedsize groupings for all COTH surveys were revised this year as follows: 0-399 beds, 400-549, 550-699, and more than 700 beds. Although first year stipends are lowest on average for the smallest bedsize grouping ($20,075) the differences from one category to another are not striking.

ATYPICALLY LARGE STIPEND INCREASES AND DECREASES (Tables 29-31)

To begin to analyze the reported stipend increases or decreases and their possible reflection of decision-making by a particular group, the housestaff survey data was arrayed by evidence of consistent action taken in all three first years to either decrease or increase stipends. Three tables reflect this analysis: Table 29 - a greater than 7 percent increase for the first three Post-MD years; Table 30 - a less than 3 percent increase for these three years; and Table 31 - institutions reporting either no increases or decreases in stipend level for all of the first three years.

The tables show that the largest percent of respondents indicating they would increase their mean stipend more than 7 percent (45 hospitals) were predominantly university-owned and state-owned institutions. The majority of the 71 hospitals indicating an increase of 3 percent or less were in the South, with a major affiliation, and/or were municipally-owned. Several

hospitals stated they planned no increase, or to decrease stipend levels, a finding that has not been reported by this survey before. Of these 43 hospitals (a subset of the 71 hospitals reporting less than a 3 percent increase), over 26 percent were in the Western region, and over 27 percent were municipally-owned.

Although the responses were verified by all 117 institutions so reporting, it must be noted that in some instances decision-making was delayed beyond the cut-off period for the survey, and in other situations, hospitals typically follow the actions of a "lead" hospitals to either increase or decrease stipends. Still, the figures seem significant and raise the question of whether hospitals are responding to the new cost-containment environment or perhaps to the evident "physician surplus," as 12.5 percent of respondents did not increase the first three years of housestaff stipends. The Department of Teaching Hospitals intends to further analyze these data.

CITY DATA (Tables 32-56)

This year's survey contains an illustration of certain cities' mean first year stipend levels compared to the nationwide mean. A computed wage index appears as the third column in Table 33. In addition, cities with sufficient numbers of COTH members responding to this survey are presented for comparative purposes, with the highest, and mean stipend reported for 23 cities. If three or fewer responses were received for any one post-MD year, the data were eliminated from the table to protect the confidentiality of the respondents. In the case of Rochester, New York, where all residents are in an integrated program with all residents paid the same amount, no table is presented. The cities and the number of respondents follow:

Akron-Youngstown-Canton	6
Baltimore	7
Boston	15
Chicago	15
Cincinnati	4
Cleveland	6
Dallas	4
Detroit	10
District of Columbia	5
Hartford	6
Houston	5
Indianapolis	4
Long Island	4
Los Angeles	9
Milwaukee	6
Newark	5
New York City	26
Philadelphia	14
Pittsburgh	9

Providence 4
San Francisco 6
Seattle 5
St. Louis 6

CLERKSHIP APPLICATIONS (Tables 57-58)

This years' survey also questioned institutions as to whether they accepted clerkship applicants from non-LCME accredited institutions (Liaison Committee on Medical Education), approximately 16 percent (54 hospitals) of those responding to this question indicated they accepted such applicants. Nationally, 692 clerkship positions were reportedly offered to non-LCME graduates in the 1982-83 academic year. The majority of these positions were in the Northeast (345 positions); but reviewed as a percent of respondents, the Midwest more typically accepts non-LCME clerkship applicants than other regions (at 20 percent of responding institutions).

The questionnaire also asked whether hospitals "require a charge, fee, or payment for taking a clerkship"? The question was separately identified for required and elective positions, and whether or not such fees were imposed for affiliated medical schools, and for medical schools outside the U.S. and Canada. Three percent of the respondents require some type of fee, as illustrated by Table 58. The amounts required by those institutions range from a low of $20 to a high of $8,000 for affiliated medical schools, $20 to $2,000 for other LCME-accredited schools; and $25 to $2,000 for accepted applicants from schools outside United States territories or Canada.

CHANGES IN RESIDENCY PROGRAMS (Appendix D)

This year's survey also asked respondents to identify two residency programs which would be most significantly increased and two programs slated for the largest decrease in the number of positions offered. Seventy-nine of those responding to the survey answered this question. This question was analyzed in an attempt to determine whether hospital behavior had changed under the new system of prospective payments for inpatient medical care initiated by the federal Medicare program. Under the prospective payment system, direct costs of medical education are currently "passed through" and paid directly by the Medicare program. A resident-to-bed adjustment, resulting in a percentage increase in the per-case payments to teaching hospitals, represents both the indirect teaching costs and those factors that increase the cost of patient care in teaching hospitals. Because these two payment mechanisms are based on absolute numbers of residents in an institution, some analysts have suggested that there exists the possibility that the incentives inherent in this payment policy would effect hospitals' behavior, resulting in an increase in the numbers of residents in order to increase payments from Medicare. A detailed analysis of this data appears as Appendix D.

The tables display data on hospitals reporting changes in residency programs, aggregated by those under prospective payments, hospitals in waivered states, VA hospitals, and children's hospitals. Analysis of this data show that, apparently, the Medicare Prospective Payment System

has not altered hospital behavior regarding actions taken to increase or decrease residency programs. It should be pointed out, however, that this question was asked early in the implementation of prospective payments, a system whose affects may be long term and gradual. This issue will be closely followed by the Department of Teaching Hospitals during the next few years in an attempt to discern the full effects of the payment system.

Table 1

Nationwide Housestaff Stipends for 1984-85 and 1983-84,
By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	343	$19,585	$20,540	$20,808	$21,683
2nd Post-MD Year	343	20,600	21,828	22,202	23,060
3rd Post-MD Year	343	21,540	23,044	23,450	24,360
4th Post-MD Year	339	22,523	24,209	24,660	25,672
5th Post-MD Year	329	23,592	25,280	25,847	27,277
6th Post-MD Year	261	24,500	26,470	27,115	29,060
		1983-84			
1st Post-MD Year	351	$18,600	$19,788	$19,919	$20,900
2nd Post-MD Year	351	19,733	20,988	21,278	22,222
3rd Post-MD Year	351	20,673	22,050	22,499	23,405
4th Post-MD Year	346	21,802	23,250	23,699	24,753
5th Post-MD Year	337	22,800	24,420	24,864	26,407
6th Post-MD Year	262	23,700	25,500	26,064	28,353

Table 2

Mean and Median Stipend Increases Nationwide, by Year of Training
1984-85 Compared with 1983-84

	Dollar Increases		Percentage Increases	
Year of Training	Median	Mean	Median	Mean
1st Post-MD Year	$ 900	$ 889	4.5%	4.5%
2nd Post-MD Year	900	924	4.3	4.3
3rd Post-MD Year	917	951	4.3	4.2
4th Post-MD Year	979	961	4.0	4.1
5th Post-MD Year	1,000	983	4.0	4.0
6th Post-MD Year	1,055	1,051	4.0	4.0

Table 3

Index Values for Average Nationwide Housestaff Stipends for 1984-85,
By Year of Training

Year of Training	Index Value: 1984-85 Median	Mean
1st Post-MD Year	1.00	1.00
2nd Post-MD Year	1.06	1.07
3rd Post-MD Year	1.12	1.13
4th Post-MD Year	1.18	1.19
5th Post-MD Year	1.23	1.24
6th Post-MD Year	1.29	1.30

* The index value is computed by dividing the median and mean stipends in each year by the median and mean stipends in the 1st Post-MD Year (the base year).

Table 4

Dollar and Percentage Increases in Nationwide Median Housestaff Stipends
Received By a Cohort of Residents

Year of Training		Dollar Increases		Percentage Increases	
1983-84	1984-85	Median	Mean	Median	Mean
1st Post-MD Yr	to 2nd Post-MD Yr*	$2,040	$2,283	10.3%	11.5%
2nd Post-MD Yr	to 3rd Post-MD Yr	2,056	2,172	9.8	10.2
3rd Post-MD Yr	to 4th Post-MD Yr	2,159	2,161	9.8	9.6
4th Post-MD Yr	to 5th Post-MD Yr	2,030	2,148	8.7	9.1
5th Post-MD Yr	to 6th Post-MD Yr	2,050	2,251	8.4	9.1

* In other words, when a 1983-84 first year resident moved ahead to the second year in the program, that resident received an average 11.5 percent increase because both a step increase and a base stipend increase took effect.

Table 5

A Comparison of Median Housestaff Stipends for 1984-85,
By Year of Training and Geographic Region

Year of Training	Northeastern	Southern	Midwestern	Western	Nationwide
	1984-85 Median Stipend, by Region				
1st Post-MD Year	$21,588	$19,020	$20,580	$19,928	$20,540
2nd Post-MD Year	22,940	20,114	21,603	22,864	21,828
3rd Post-MD Year	24,000	21,073	22,593	24,624	23,044
4th Post-MD Year	25,395	22,047	23,600	26,064	24,209
5th Post-MD Year	27,000	23,082	24,700	27,618	25,280
6th Post-MD Year	28,700	23,920	25,608	29,013	26,470
	1984-85 Median Stipend as Percent of Nationwide Median, by Region				
1st Post-MD Year	105.1%	92.6%	100.2%	97.0%	100.0%
2nd Post-MD Year	105.1	92.1	99.0	104.7	100.0
3rd Post-MD Year	104.1	91.4	98.0	106.9	100.0
4th Post-MD Year	104.9	91.1	97.5	107.7	100.0
5th Post-MD Year	106.8	91.3	97.7	109.3	100.0
6th Post-MD Year	108.4	90.4	96.7	109.6	100.0

Figure 1:
First Post–M.D. Year Median Salary Data:
A Six Year Comparison by
Region

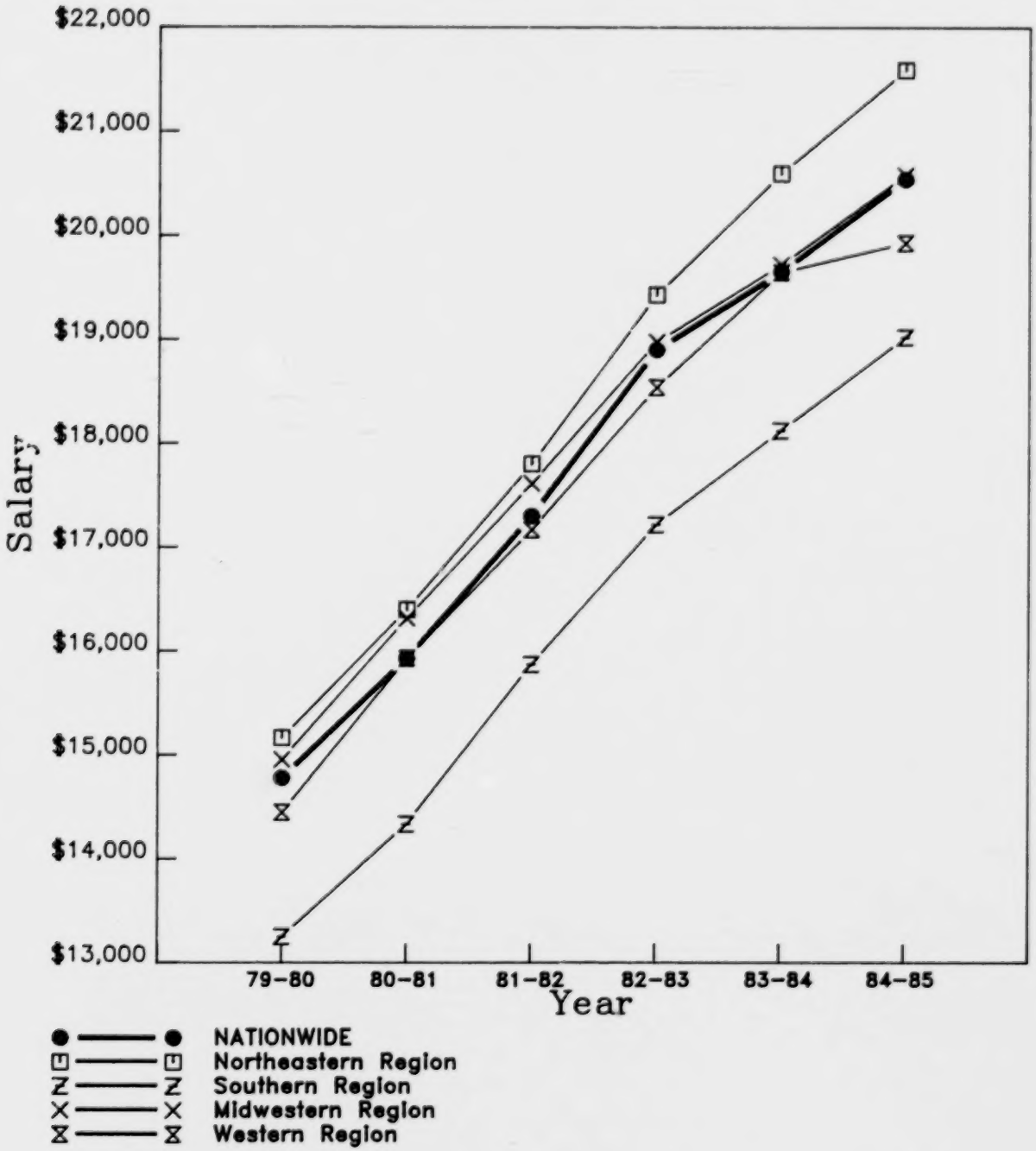


Table 6

Northeastern Region: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	133	$20,367	$21,588	$21,943	$23,000
2nd Post-MD Year	133	21,750	22,940	23,439	24,589
3rd Post-MD Year	133	22,926	24,000	24,837	25,907
4th Post-MD Year	132	24,179	25,395	26,085	27,539
5th Post-MD Year	127	25,550	27,000	27,421	29,150
6th Post-MD Year	102	26,914	28,700	29,012	30,894
		1983-84			
1st Post-MD Year	137	$19,600	$20,560	$20,888	$21,758
2nd Post-MD Year	137	20,800	21,900	22,342	23,500
3rd Post-MD Year	137	21,950	23,000	23,693	24,627
4th Post-MD Year	135	23,005	24,500	24,929	26,228
5th Post-MD Year	131	24,254	26,000	26,217	27,690
6th Post-MD Year	103	25,529	27,500	27,735	29,777

Table 7

Southern Region: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	65	$18,683	$19,020	$19,108	$19,766
2nd Post-MD Year	65	19,500	20,114	20,162	21,003
3rd Post-MD Year	65	20,500	21,073	21,120	22,066
4th Post-MD Year	64	21,000	22,047	22,112	23,204
5th Post-MD Year	64	21,650	23,082	23,073	24,282
6th Post-MD Year	52	22,614	23,920	23,941	25,299
		1983-84			
1st Post-MD Year	67	$17,884	$18,324	$18,419	$19,009
2nd Post-MD Year	67	18,500	19,344	19,428	20,082
3rd Post-MD Year	67	19,396	20,368	20,384	21,283
4th Post-MD Year	66	20,146	21,206	21,406	22,459
5th Post-MD Year	66	20,900	22,260	22,345	23,557
6th Post-MD Year	52	21,800	23,135	23,115	24,321

Table 8

Midwestern Region: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	100	$19,800	$20,580	$20,507	$21,011
2nd Post-MD Year	100	20,760	21,603	21,527	22,100
3rd Post-MD Year	100	21,600	22,593	22,525	23,200
4th Post-MD Year	98	22,856	23,600	23,573	24,400
5th Post-MD Year	93	23,606	24,700	24,576	25,300
6th Post-MD Year	69	24,306	25,608	25,493	26,400
		1983-84			
1st Post-MD Year	100	$18,990	$19,853	$19,683	$20,300
2nd Post-MD Year	100	19,733	20,896	20,701	21,279
3rd Post-MD Year	100	20,720	21,787	21,669	22,400
4th Post-MD Year	98	21,802	22,828	22,709	23,500
5th Post-MD Year	93	23,000	23,986	23,721	24,500
6th Post-MD Year	67	23,700	24,598	24,582	25,513

Table 9

Western Region: Housestaff Stipends for 1984-85 and 1983-84,
By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	45	$19,620	$19,928	$20,576	$21,553
2nd Post-MD Year	45	21,047	22,864	22,995	24,802
3rd Post-MD Year	45	22,311	24,624	24,773	26,873
4th Post-MD Year	45	23,649	26,064	26,469	28,902
5th Post-MD Year	45	25,000	27,618	27,982	30,240
6th Post-MD Year	38	26,019	29,013	29,310	32,137
		1983-84			
1st Post-MD Year	47	$18,384	$19,200	$19,736	$20,779
2nd Post-MD Year	47	20,045	21,257	22,040	24,475
3rd Post-MD Year	47	21,249	23,000	23,802	25,914
4th Post-MD Year	47	22,690	24,700	25,447	28,661
5th Post-MD Year	47	24,377	26,300	26,892	29,234
6th Post-MD Year	40	25,307	27,100	28,077	30,100

Table 10

Mean and Median Stipend Increases by Region and Year of Training
1984-85 Compared with 1983-84

Dollar Increases, by Region

	Northeastern		Southern		Midwestern		Western	
Year of Training	Median	Mean	Median	Mean	Median	Mean	Median	Mean
1st Post-MD Year	$ 808	$1,055	$ 780	$ 689	$ 792	$ 824	$ 900	$ 840
2nd Post-MD Year	1,000	1,097	800	734	790	826	1,025	955
3rd Post-MD Year	1,000	1,144	804	736	828	856	1,062	971
4th Post-MD Year	1,100	1,156	823	706	859	864	1,126	1,022
5th Post-MD Year	1,150	1,204	856	728	872	855	1,194	1,090
6th Post-MD Year	1,250	1,277	908	826	945	911	1,311	1,233

Percentage Increases, by Region

1st Post-MD Year	4.8%	5.1%	4.3%	3.7%	4.0%	4.2%	4.8%	4.3%
2nd Post-MD Year	4.6	4.9	4.3	3.8	4.0	4.0	5.0	4.3
3rd Post-MD Year	4.4	4.8	4.0	3.6	4.0	4.0	5.0	4.1
4th Post-MD Year	4.4	4.6	3.9	3.3	3.8	3.8	4.8	4.0
5th Post-MD Year	4.3	4.6	3.8	3.3	3.5	3.6	4.9	4.1
6th Post-MD Year	4.4	4.6	3.5	3.6	3.8	3.7	4.6	4.4

Table 11

A Comparison of Median Housestaff Stipends for 1984-85,
By Year of Training and Hospital Affiliation

Year of Training	University-Owned	Major Affiliate	Limited Affiliate	Nationwide
1984-85 Median Stipend, by Affiliation Relationship				
1st Post-MD Year	$19,780	$20,580	$21,315	$20,540
2nd Post-MD Year	21,086	21,828	22,400	21,828
3rd Post-MD Year	22,338	23,044	23,796	23,044
4th Post-MD Year	23,520	24,200	25,305	24,209
5th Post-MD Year	24,570	25,250	27,000	25,280
6th Post-MD Year	25,847	26,572	28,404	26,470
1984-85 Median Stipend as Percent of Nationwide Median, by Affiliation Relationship				
1st Post-MD Year	96.3%	100.2%	103.8%	100.0%
2nd Post-MD Year	96.6	100.0	102.6	100.0
3rd Post-MD Year	96.9	100.0	103.3	100.0
4th Post-MD Year	97.2	100.0	104.5	100.0
5th Post-MD Year	97.2	99.9	106.8	100.0
6th Post-MD Year	97.6	100.3	107.3	100.0

Figure 2:
First Post–M.D. Year Median Salary Data: A Six Year Comparison by Affiliation

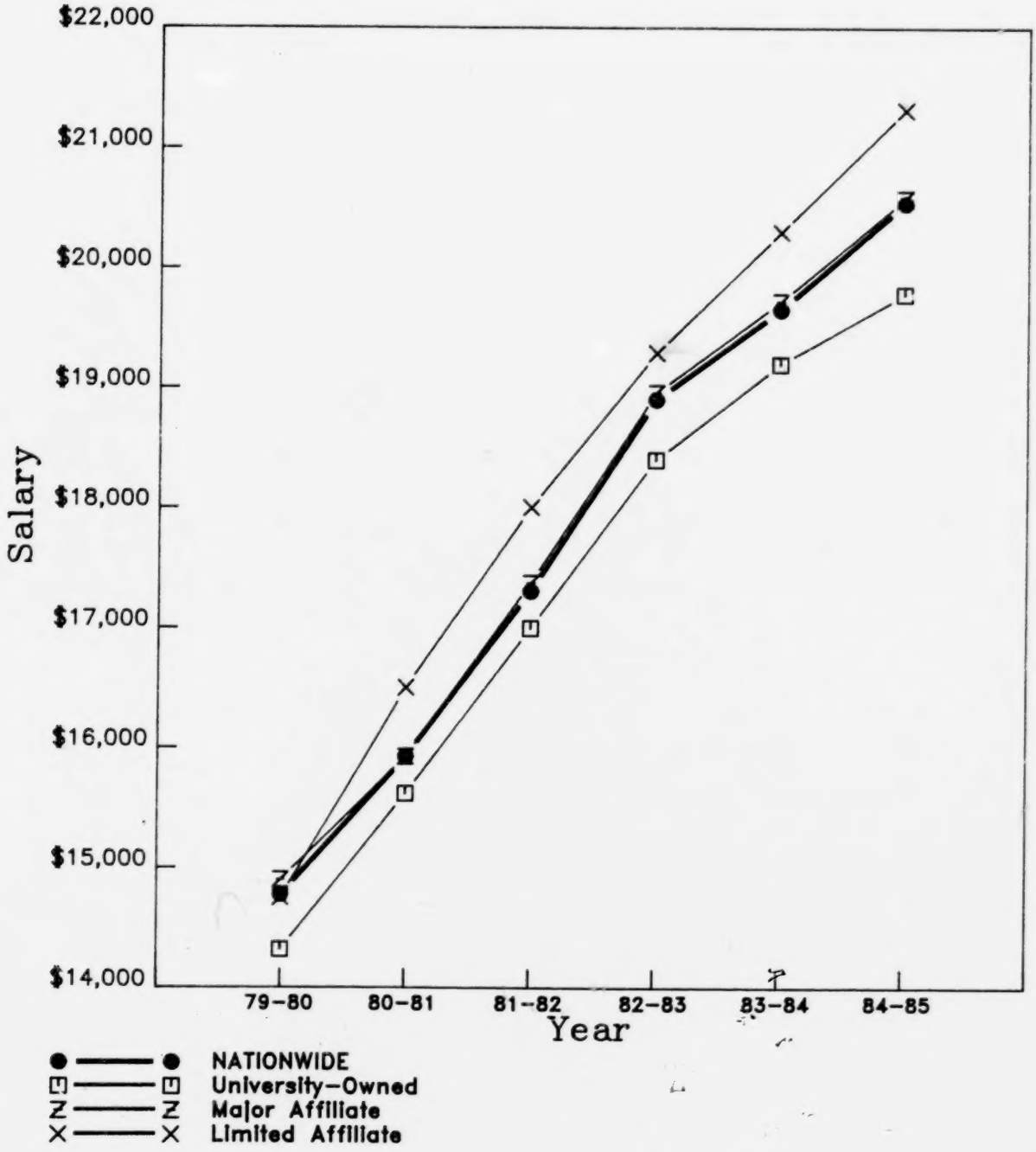


Table 12

University-Owned Hospitals: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	55	$18,900	$19,780	$19,951	$20,700
2nd Post-MD Year	55	19,684	21,086	21,303	22,630
3rd Fost-MD Year	55	21,000	22,338	22,466	23,900
4th Post-MD Year	55	21,902	23,520	23,621	25,100
5th Post-MD Year	54	23,100	24,570	24,830	26,319
6th Post-MD Year	49	24,300	25,847	26,034	27,528
		1983-84			
1st Post-MD Year	58	$18,000	$18,800	$18,989	$19,882
2nd Post-MD Year	58	19,250	20,082	20,271	21,418
3rd Post-MD Year	58	20,033	21,283	21,403	22,900
4th Post-MD Year	58	20,998	22,462	22,575	24,225
5th Post-MD Year	57	21,984	23,875	23,748	25,400
6th Post-MD Year	51	22,947	24,747	24,792	26,500

Table 13

Major Affiliate: Housestaff Stipends for 1984-85 and 1983-84,
By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
			1984-85		
1st Post-MD Year	245	$19,620	$20,580	$20,897	$22,000
2nd Post-MD Year	244	20,760	21,828	22,278	23,166
3rd Post-MD Year	244	21,600	23,044	23,518	24,382
4th Post-MD Year	241	22,630	24,200	24,722	25,600
5th Post-MD Year	232	23,600	25,250	25,894	27,115
6th Post-MD Year	188	24,500	26,572	27,248	29,500
			1983-84		
1st Post-MD Year	248	$18,750	$19,801	$20,051	$21,000
2nd Post-MD Year	247	19,776	21,000	21,392	22,300
3rd Post-MD Year	247	20,696	22,069	22,610	23,450
4th Post-MD Year	243	21,852	23,234	23,804	24,731
5th Post-MD Year	235	22,818	24,400	24,956	26,493
6th Post-MD Year	187	23,700	25,566	26,260	28,451

Table 14

Limited Affiliate: Housestaff Stipends for 1984-85 and 1983-84,
By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
			1984-85		
1st Post-MD Year	37	$19,780	$21,315	$21,264	$21,800
2nd Post-MD Year	38	21,475	22,400	22,795	23,783
3rd Post-MD Year	38	22,475	23,796	24,170	25,358
4th Post-MD Year	37	23,649	25,305	25,564	26,625
5th Post-MD Year	37	25,069	27,000	26,840	28,160
6th Post-MD Year	21	25,988	28,404	27,953	29,692
			1983-84		
1st Post-MD Year	39	$19,031	$20,200	$20,254	$21,240
2nd Post-MD Year	40	20,092	21,600	21,824	22,632
3rd Post-MD Year	40	21,466	22,993	23,169	24,000
4th Post-MD Year	39	22,700	24,200	24,513	25,600
5th Post-MD Year	39	23,875	25,351	25,780	27,092
6th Post-MD Year	21	25,355	27,058	27,000	28,650

Table 15

Mean and Median Stipend Increases by Hospital Affiliation Relationship and Year of Training
1984-85 Compared with 1983-84

Dollar Increases, by Affiliation Relationship

Year of Training	University-Owned		Major Affiliate		Limited Affiliate	
	Median	Mean	Median	Mean	Median	Mean
1st Post-MD Year	$ 900	$ 962	$ 894	$ 846	$ 828	$1,010
2nd Post-MD Year	1,004	1,032	900	886	850	971
3rd Post-MD Year	998	1,063	909	908	803	1,001
4th Post-MD Year	1,030	1,046	966	918	840	1,051
5th Post-MD Year	1,100	1,082	995	938	868	1,060
6th Post-MD Year	1,128	1,242	1,026	988	845	953

Percentage Increases, by Affiliation Relationship

1st Post-MD Year	4.9%	5.1%	4.3%	4.2%	4.0%	5.0%
2nd Post-MD Year	5.0	5.1	4.3	4.1	4.0	4.4
3rd Post-MD Year	5.0	5.0	4.3	4.0	4.0	4.3
4th Post-MD Year	5.0	4.6	4.0	3.9	4.0	4.3
5th Post-MD Year	4.9	4.6	4.0	3.8	3.9	4.1
6th Post-MD Year	4.7	5.0	4.0	3.8	3.5	3.5

Table 16

A Comparison of Median Housestaff Stipends for 1984-85,
By Year of Training and Hospital Ownership

Year of Training	State-Owned	Municipally-Owned	Church-Owned	Other, Nonprofit	Veterans Administration	Nationwide
	1984-85 Median Stipend, by Hospital Ownership					
1st Post-MD Year	$19,620	$19,888	$20,580	$20,800	$20,075	$20,540
2nd Post-MD Year	20,796	21,987	21,987	21,940	21,370	21,828
3rd Post-MD Year	21,636	23,044	23,200	23,250	22,345	23,044
4th Post-MD Year	22,690	24,351	24,351	24,450	23,649	24,209
5th Post-MD Year	24,101	25,043	25,300	25,700	24,711	25,280
6th Post-MD Year	25,500	26,859	26,859	27,159	26,019	26,470
	1984-85 Median Stipend as Percent of Nationwide Median, by Hospital Ownership					
1st Post-MD Year	95.5%	96.8%	100.2%	101.3%	97.7%	100.0%
2nd Post-MD Year	95.3	100.7	100.7	100.5	97.9	100.0
3rd Post-MD Year	93.9	100.0	100.7	100.9	97.0	100.0
4th Post-MD Year	93.7	100.6	100.6	101.0	97.7	100.0
5th Post-MD Year	95.3	99.1	100.1	101.7	97.7	100.0
6th Post-MD Year	96.3	101.5	101.5	102.6	98.3	100.0

Figure 3:
First Post-M.D. Year Median Salary Data:
A Six Year Comparison by
Type of Ownership

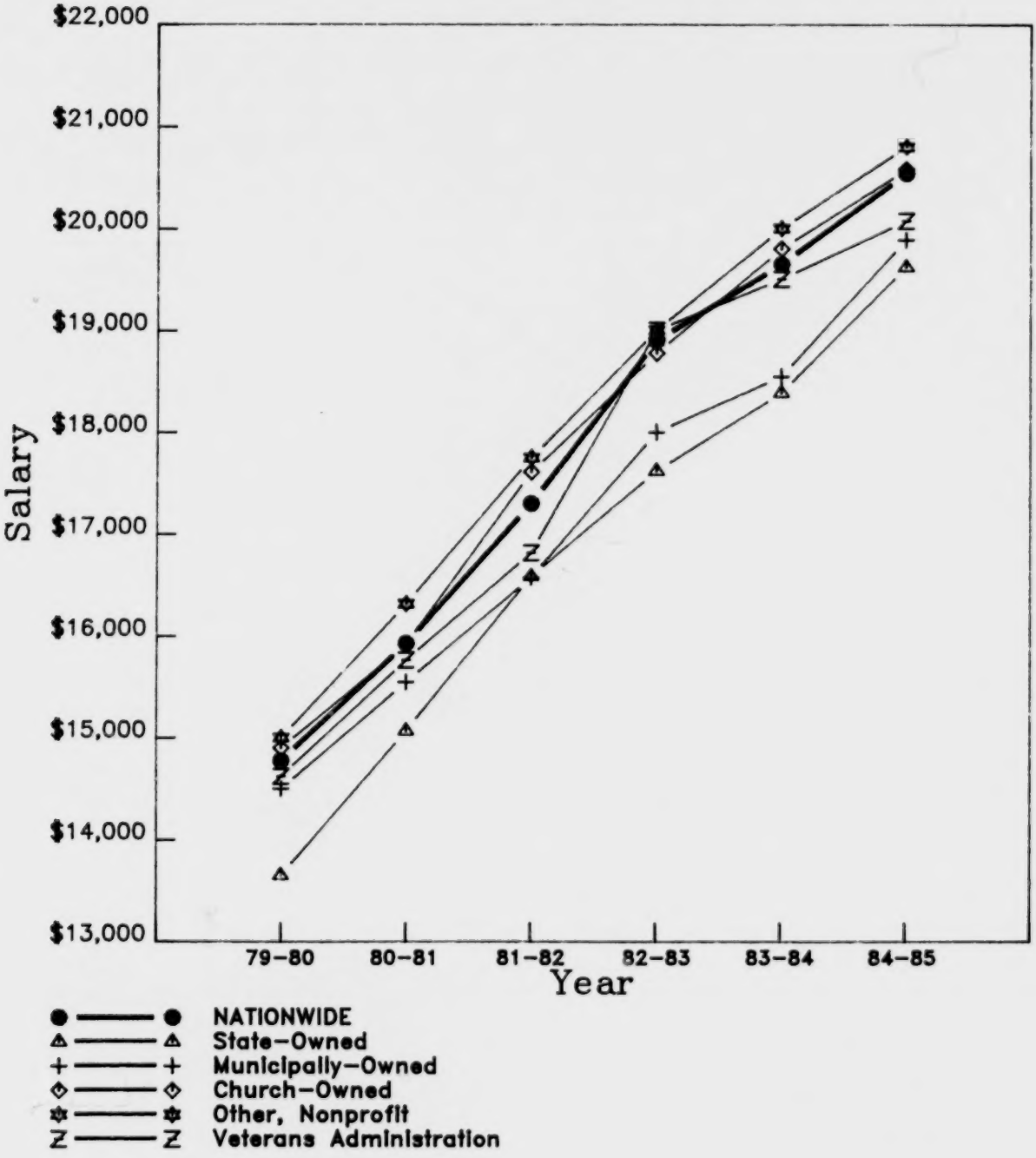


Table 17

State-Owned Hospitals: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	40	$18,683	$19,620	$19,662	$20,100
2nd Post-MD Year	40	19,618	20,796	20,991	21,728
3rd Post-MD Year	40	20,650	21,636	22,164	23,028
4th Post-MD Year	40	21,630	22,690	23,309	24,297
5th Post-MD Year	40	22,643	24,101	24,438	25,173
6th Post-MD Year	38	23,850	25,500	25,579	27,050
		1983-84			
1st Post-MD Year	43	$17,896	$18,384	$18,686	$19,200
2nd Post-MD Year	43	19,047	20,042	19,933	20,600
3rd Post-MD Year	43	20,014	21,000	21,056	22,100
4th Post-MD Year	43	20,754	22,128	22,244	23,431
5th Post-MD Year	43	21,475	23,076	23,338	24,700
6th Post-MD Year	40	22,400	24,192	24,275	25,750

Table 18

Municipally-Owned Hospitals: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
			1984-85		
1st Post-MD Year	29	$19,296	$19,888	$20,832	$22,115
2nd Post-MD Year	29	20,256	21,987	22,761	25,361
3rd Post-MD Year	29	21,091	23,044	24,217	27,270
4th Post-MD Year	29	22,043	24,351	25,437	28,726
5th Post-MD Year	29	23,146	25,043	26,584	29,831
6th Post-MD Year	23	23,435	26,859	27,681	31,695
			1983-84		
1st Post-MD Year	29	$18,372	$19,888	$20,084	$21,758
2nd Post-MD Year	29	19,296	21,400	21,959	24,802
3rd Post-MD Year	29	20,280	22,593	23,396	26,874
4th Post-MD Year	29	21,349	23,585	24,603	28,447
5th Post-MD Year	29	22,256	24,576	25,770	29,324
6th Post-MD Year	23	23,435	25,566	26,805	30,051

Table 19

Church-Owned Hospitals: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	44	$20,000	$20,580	$20,954	$21,600
2nd Post-MD Year	44	21,047	21,987	22,243	22,822
3rd Post-MD Year	44	22,244	23,200	23,459	23,940
4th Post-MD Year	44	23,260	24,351	24,544	24,986
5th Post-MD Year	42	24,329	25,300	25,628	26,200
6th Post-MD Year	23	25,475	26,859	27,357	29,060
		1983-84			
1st Post-MD Year	44	$19,097	$19,900	$20,078	$20,600
2nd Post-MD Year	44	20,114	21,100	21,411	22,000
3rd Post-MD Year	44	21,249	22,177	22,579	23,000
4th Post-MD Year	44	22,400	23,300	23,674	24,200
5th Post-MD Year	42	23,200	24,420	24,765	25,376
6th Post-MD Year	21	24,516	25,951	26,416	27,940

Table 20

Other, Nonprofit Hospitals: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
			1984-85		
1st Post-MD Year	166	$19,780	$20,800	$21,036	$21,887
2nd Post-MD Year	166	21,146	21,940	22,403	23,192
3rd Post-MD Year	166	22,206	23,250	23,645	24,390
4th Post-MD Year	162	23,240	24,450	24,922	25,934
5th Post-MD Year	154	24,396	25,700	26,173	27,500
6th Post-MD Year	115	25,550	27,159	27,641	29,692
			1983-84		
1st Post-MD Year	171	$19,031	$20,000	$20,125	$20,966
2nd Post-MD Year	171	20,322	21,150	21,463	22,300
3rd Post-MD Year	171	21,447	22,400	22,670	23,500
4th Post-MD Year	166	22,304	23,500	23,914	24,910
5th Post-MD Year	159	23,400	24,600	25,139	26,500
6th Post-MD Year	117	24,516	26,120	26,575	28,500

Table 21

Veterans Administration Hospitals: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	62	$19,281	$20,075	$20,751	$22,200
2nd Post-MD Year	62	20,296	21,370	22,084	23,265
3rd Post-MD Year	62	21,209	22,345	23,312	24,382
4th Post-MD Year	62	22,290	23,649	24,472	25,575
5th Post-MD Year	62	23,100	24,711	25,645	27,115
6th Post-MD Year	61	23,920	26,019	26,801	28,298
		1983-84			
1st Post-MD Year	62	$18,254	$19,685	$19,938	$21,337
2nd Post-MD Year	62	19,488	20,800	21,207	22,411
3rd Post-MD Year	62	20,500	21,847	22,464	23,359
4th Post-MD Year	62	21,456	22,828	23,623	24,686
5th Post-MD Year	62	22,514	24,000	24,746	26,407
6th Post-MD Year	60	23,135	25,053	25,888	27,911

Table 22

Mean and Median Stipend Increases by Hospital Ownership and Year of Training

1984-84 Compared with 1983-84

Year of Training	State-Owned		Municipally-Owned		Church-Owned		Other, Nonprofit		Veterans Administration	
	Median	Mean	Median	Mean	Median	Mean	Median	Mean	Median	Mean
Dollar Increases, by Hospital Ownership										
1st Post-MD Year	$ 950	$ 976	$ 900	$748	$ 888	$ 876	$ 899	$ 911	$ 848	$ 813
2nd Post-MD Year	1,026	1,058	900	802	894	832	900	940	881	877
3rd Post-MD Year	1,064	1,108	917	821	900	880	909	975	895	848
4th Post-MD Year	1,100	1,065	979	834	869	870	1,000	1,008	858	849
5th Post-MD Year	1,147	1,100	1,000	814	880	863	1,000	1,034	900	899
6th Post-MD Year	1,128	1,304	1,055	876	918	941	1,100	1,066	920	913
Percentage Increases, by Hospital Ownership										
1st Post-MD Year	5.0%	5.2%	4.5%	3.7%	4.2%	4.4%	4.3%	4.5%	4.0%	4.1%
2nd Post-MD Year	5.0	5.3	4.3	3.7	4.0	3.9	4.3	4.4	4.3	4.1
3rd Post-MD Year	5.0	5.3	4.3	3.5	4.0	3.9	4.2	4.3	4.0	3.8
4th Post-MD Year	5.0	4.8	4.0	3.4	4.0	3.7	4.1	4.2	4.0	4.0
5th Post-MD Year	5.0	4.7	4.0	3.2	4.0	3.5	4.0	4.1	4.0	3.6
6th Post-MD Year	5.0	5.4	4.0	3.3	3.5	3.6	4.0	4.0	4.0	3.5

Table 23

A Comparison of Median Housestaff Stipends for 1984-85,
By Year of Training and Hospital Bed Size

Year of Training	399 or Fewer	400-549	550-699	700 or More	Nationwide
	1984-85 Median Stipend, by Hospital Bed Size				
1st Post-MD Year	$20,075	$20,580	$20,517	$20,700	$20,540
2nd Post-MD Year	21,506	21,800	21,900	21,940	21,828
3rd Post-MD Year	22,593	23,000	23,200	23,052	23,044
4th Post-MD Year	23,707	24,209	24,400	24,250	24,209
5th Post-MD Year	24,950	25,200	25,725	25,324	25,280
6th Post-MD Year	26,055	26,447	27,040	26,800	26,470
	1984-85 Median Stipend as Percent of Nationwide Median, by Hospital Bed Size				
1st Post-MD Year	97.7%	100.2%	99.9%	100.8%	100.0%
2nd Post-MD Year	98.5	99.9	100.3	100.5	100.0
3rd Post-MD Year	98.0	99.8	100.7	100.0	100.0
4th Post-MD Year	97.9	100.0	100.8	100.2	100.0
5th Post-MD Year	98.7	99.7	101.8	100.2	100.0
6th Post-MD Year	98.4	99.9	102.2	101.2	100.0

Table 24

Hospitals with 399 or Fewer Beds: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
			1984-85		
1st Post-MD Year	92	$19,500	$20,075	$20,546	$21,500
2nd Post-MD Year	92	20,500	21,506	22,030	23,000
3rd Post-MD Year	92	21,500	22,593	23,245	24,132
4th Post-MD Year	90	22,500	23,707	24,573	25,500
5th Post-MD Year	86	23,500	24,950	25,765	27,024
6th Post-MD Year	71	24,500	26,055	26,872	28,700
			1983-84		
1st Post-MD Year	94	$18,441	19,503	$19,694	$20,773
2nd Post-MD Year	94	19,600	20,800	21,128	22,000
3rd Post-MD Year	94	20,600	21,635	22,337	23,200
4th Post-MD Year	92	21,696	22,966	23,612	24,624
5th Post-MD Year	88	22,800	24,259	24,805	26,250
6th Post-MD Year	73	23,904	25,496	25,864	26,998

Table 25

Hospitals with 400-549 Beds: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	100	$19,425	$20,580	$20,725	$21,680
2nd Post-MD Year	100	20,450	21,800	22,072	23,025
3rd Post-MD Year	100	21,500	23,000	23,288	24,382
4th Post-MD Year	98	22,790	24,209	24,482	25,950
5th Post-MD Year	94	23,606	25,200	25,663	27,500
6th Post-MD Year	67	24,306	26,447	26,836	29,280
		1983-84			
1st Post-MD Year	102	$18,600	$19,650	$19,794	$20,900
2nd Post-MD Year	102	19,728	20,900	21,115	22,067
3rd Post-MD Year	102	20,670	22,016	22,264	23,111
4th Post-MD Year	99	21,943	23,200	23,479	24,850
5th Post-MD Year	96	22,954	24,259	24,645	26,300
6th Post-MD Year	64	23,135	25,211	25,695	27,911

Table 26

Hospitals with 550-699 Beds: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	59	$19,440	$20,517	$20,790	$21,548
2nd Post-MD Year	59	20,795	21,900	22,156	23,100
3rd Post-MD Year	59	21,660	23,200	23,424	24,360
4th Post-MD Year	59	22,470	24,400	24,562	25,600
5th Post-MD Year	57	23,592	25,725	25,835	27,175
6th Post-MD Year	44	24,518	27,040	27,182	29,570
		1983-84			
1st Post-MD Year	61	$18,404	$19,788	$19,941	$20,700
2nd Post-MD Year	61	19,733	20,988	21,274	22,131
3rd Post-MD Year	61	20,673	22,100	22,571	23,424
4th Post-MD Year	61	21,617	23,449	23,707	24,792
5th Post-MD Year	59	22,611	24,976	24,923	26,672
6th Post-MD Year	46	23,462	25,919	26,268	28,451

Table 27

Hospitals with 700 or More Beds: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Number of Hospitals	25th Percentile	Median	Mean	75th Percentile
		1984-85			
1st Post-MD Year	92	$19,760	$20,700	$21,169	$22,000
2nd Post-MD Year	92	20,800	21,940	22,544	23,277
3rd Post-MD Year	92	21,600	23,052	23,840	24,390
4th Post-MD Year	92	22,414	24,250	24,997	26,000
5th Post-MD Year	92	23,424	25,324	26,122	27,618
6th Post-MD Year	79	24,518	26,800	27,532	30,051
		1983-84			
1st Post-MD Year	94	$18,826	$19,984	$20,266	$21,300
2nd Post-MD Year	94	20,000	21,150	21,606	22,452
3rd Post-MD Year	94	20,966	22,100	22,870	23,500
4th Post-MD Year	94	21,932	23,450	24,009	24,860
5th Post-MD Year	94	23,000	24,468	25,106	26,500
6th Post-MD Year	79	23,886	25,746	26,429	29,200

Table 28

Mean and Median Stipend Increases by Hospital
Bed Size and Year of Training
1984-85 Compared with 1983-84

Year of Training	399 or Fewer		400-549		550-699		700 or More	
	Median	Mean	Median	Mean	Median	Mean	Median	Mean
Dollar Increases, by Hospital Bed Size								
1st Post-MD Year	$ 900	$ 852	$ 850	$ 931	$ 911	$ 849	$ 885	$ 903
2nd Post-MD Year	950	902	900	957	1,000	882	900	938
3rd Post-MD Year	957	917	909	1,024	1,000	853	900	970
4th Post-MD Year	1,000	961	947	1,003	1,000	855	920	988
5th Post-MD Year	1,000	960	910	1,018	1,026	912	985	1,016
6th Post-MD Year	1,128	1,008	1,140	1,141	1,040	914	1,014	1,103
Percentage Increases, by Hospital Bed Size								
1st Post-MD Year	4.8%	4.3%	4.1%	4.7%	4.9%	4.3%	4.5%	4.5%
2nd Post-MD Year	4.6	4.3	4.0	4.5	4.8	4.1	4.3	4.3
3rd Post-MD Year	4.4	4.1	4.0	4.6	4.5	3.8	4.2	4.2
4th Post-MD Year	4.2	4.1	4.0	4.3	4.5	3.6	4.0	4.1
5th Post-MD Year	4.0	3.9	3.9	4.1	4.6	3.7	4.0	4.0
6th Post-MD Year	4.3	3.9	4.1	4.4	4.5	3.5	4.0	4.2

Table 29

Percent of Hospitals
Indicating More Than A Seven Percent Increase in Stipends for 1984-85
In at Least the First Three Post Graduate Years

	Percent Increasing >7%
Geographic Region	
Northeastern (N=133)	18.0%
Southern (N=65)	12.3
Midwestern (N=100)	6.0
Western (N=45)	17.8
Affiliation Relationship	
University-Owned (N=55)	21.8%
Major Affiliate (N=245)	12.7
Limited Affiliate (N=43)	7.0
Hospital Ownership	
State-Owned (N=40)	25.0%
Municipally-Owned (N=29)	13.8
Church-Owned (N=44)	6.8
Other, Nonprofit (N=166)	10.2
Veterans Administration (N=62)	19.4
Hospital Bedsize	
399 or Fewer (N=92)	16.3%
400-549 (N=100)	8.0
550-699 (N=59)	18.6
700 or More (N=92)	13.0
National (N=343)	13.4%

Total hospitals reporting greater than 7% increase = 46

Table 30

Percent of Hospitals
Indicating Less Than a Three Percent Increase in Stipends for 1984-85
In at Least the First Three Post Graduate Years

	Percent Increasing <3%
Geographic Region	
Northeastern (N=133)	13.5%
Southern (N=65)	30.8
Midwestern (N=100)	21.0
Western (N=45)	26.7
Affiliation Relationship	
University-Owned (N=55)	16.4%
Major Affiliate (N=245)	22.5
Limited Affiliate (N=43)	16.3
Hospital Ownership	
State-Owned (N=40)	17.5%
Municipally-Owned (N=29)	31.0
Church-Owned (N=44)	13.6
Other, Nonprofit (N=166)	17.5
Veterans Administration (N=62)	30.6
Hospital Bedsize	
399 or Fewer (N=92)	25.0%
400-549 (N=100)	19.0
550-699 (N=59)	17.0
700 or More (N=92)	20.7
National (N=343)	20.7%

Total hospitals reporting less than 3% increase = 71

Table 31

Percent of Hospitals Indicating
No Increase or a Decrease in Stipends for 1984-85
In at Least the First Three Post Graduate Years

	Percent Indicating No Increase or a Decrease
Geographic Region	
Northeastern (N=133)	8.3%
Southern (N=65)	16.9
Midwestern (N=100)	9.0
Western (N=45)	26.6
Affiliation Relationship	
University-Owned (N=55)	7.2%
Major Affiliate (N=245)	13.9
Limited Affiliate (N=43)	14.0
Hospital Ownership	
State-Owned (N=40)	10.0%
Municipally-Owned (N=29)	27.6
Church-Owned (N=44)	6.8
Other, Nonprofit (N=166)	8.4
Veterans Administration (N=62)	21.0
Hospital Bedsize	
399 or Fewer (N=92)	15.2%
400-549 (N=100)	11.0
550-699 (N=59)	15.3
700 or More (N=92)	9.8
National (N=343)	12.5%

Total hospitals reporting either no increase or a decrease = 43

Table 32

Mean First-Year Stipend Indexed to
National Mean by City
1984-85

	Mean 1st Yr. Stipend	Index Value
National	$20,808	1.0000
Akron-Youngstown, OH	21,765	1.0460
Baltimore, MD	19,678	.9457
Boston, MA	21,865	1.0508
Chicago, IL	20,796	.9995
Cincinnati, OH	20,844	1.0018
Cleveland, OH	21,369	1.0270
Dallas, TX	18,796	.9034
Detroit, MI	21,327	1.0250
District of Columbia	20,099	.9660
Hartford, CT	21,082	1.0132
Houston, TX	20,266	.9740
Indianapolis, IN	19,266	.9259
Long Island, NY	24,685	1.1864
Los Angeles, CA	20,356	.9783
Milwaukee, WI	19,875	.9552
Newark, NJ	22,217	1.0678
New York, NY	25,202	1.2112
Philadelphia, PA	21,485	1.0326
Pittsburg, PA	20,955	1.0071
Providence, RI	21,021	1.0103
Rochester, NY	19,500	.9372
San Francisco, CA	21,061	1.0122
St. Louis, MO	20,750	.9659
Seattle, WA	19,640	.9444
All Other Cities	20,097	.9659

Table 33

Akron-Youngstown-Canton, Ohio: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,765	$20,500	$25,043	6
2nd Post-MD Year	23,057	21,500	27,443	6
3rd Post-MD Year	24,373	22,500	29,843	6
4th Post-MD Year	25,673	23,500	32,243	6
5th Post-MD Year	27,635	24,500	34,643	4
6th Post-MD Year	*	*	*	1
		1983-84		
1st Post-MD Year	$20,945	$20,000	$23,625	6
2nd Post-MD Year	22,129	20,900	26,025	6
3rd Post-MD Year	23,320	21,800	28,425	6
4th Post-MD Year	24,520	22,700	30,825	6
5th Post-MD Year	26,106	23,600	33,225	4
6th Post-MD Year	*	*	*	1

*Too few respondents to report data.

Table 34

Baltimore, Maryland: Housestaff Stipends for 1984-85 and 1983-84
By Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$19,678	$18,750	$21,380	7
2nd Post-MD Year	20,821	19,750	23,260	7
3rd Post-MD Year	21,706	20,450	24,540	7
4th Post-MD Year	22,731	21,150	26,230	7
5th Post-MD Year	23,720	21,850	27,900	7
6th Post-MD Year	25,353	22,550	29,580	5
		1983-84		
1st Post-MD Year	$18,384	$14,698	$20,560	8
2nd Post-MD Year	19,448	15,511	22,370	8
3rd Post-MD Year	20,348	16,548	23,600	8
4th Post-MD Year	21,346	17,825	25,220	8
5th Post-MD Year	22,443	19,926	26,830	8
6th Post-MD Year	24,348	21,800	28,440	5

Table 35

Boston, Massachusetts: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,865	$19,800	$23,063	15
2nd Post-MD Post	23,021	20,950	24,198	15
3rd Post-MD Year	24,120	22,050	25,334	15
4th Post-MD Year	25,758	23,575	27,108	15
5th Post-MD Year	27,215	24,950	27,950	13
6th Post-MD Year	29,454	26,225	30,450	12
		1983-84		
1st Post-MD Year	$21,070	$19,800	$22,277	15
2nd Post-MD Year	22,188	20,950	23,277	15
3rd Post-MD Year	23,294	22,050	24,277	15
4th Post-MD Year	24,786	23,575	25,777	15
5th Post-MD Year	26,352	24,950	27,277	13
6th Post-MD Year	28,430	26,225	29,777	10

Table 36

Chicago, Illinois: Housestaff Stipends for 1984-85 and 1983-84,
By Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,796	$19,031	$22,200	15
2nd Post-MD Year	21,884	20,081	23,180	15
3rd Post-MD Year	22,964	21,131	24,390	15
4th Post-MD Year	24,198	22,181	25,600	14
5th Post-MD Year	25,290	23,231	26,805	13
6th Post-MD Year	26,874	25,140	28,400	8
		1983-84		
1st Post-MD Year	$20,250	$18,826	$21,559	15
2nd Post-MD Year	21,307	19,767	22,459	15
3rd Post-MD Year	22,345	20,759	23,500	15
4th Post-MD Year	23,509	21,802	24,860	14
5th Post-MD Year	24,601	22,860	26,315	13
6th Post-MD Year	26,073	24,028	27,835	7

Table 37

Cincinnati, Ohio: Housestaff Stipends for 1984-85 and 1983-84, By Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,844	$19,708	$21,600	4
2nd Post-MD Year	22,042	20,671	22,866	4
3rd Post-MD Year	23,168	21,808	24,201	4
4th Post-MD Year	24,019	23,008	24,500	4
5th Post-MD Year	24,984	24,273	25,300	4
6th Post-MD Year	26,214	*	*	3
		1983-84		
1st Post-MD Year	$19,995	$18,725	$20,773	4
2nd Post-MD Year	21,160	19,640	22,418	4
3rd Post-MD Year	22,254	20,720	23,726	4
4th Post-MD Year	23,097	21,860	23,879	4
5th Post-MD Year	24,188	23,062	25,190	4
6th Post-MD Year	25,446	*	*	3

*Too few respondents to report data.

Table 38

Cleveland, Ohio: Housestaff Stipends for 1984-85 and 1983-84,
By Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,369	$21,000	$22,260	6
2nd Post-MD Year	22,252	21,861	23,373	6
3rd Post-MD Year	23,121	22,761	24,152	6
4th Post-MD Year	24,043	23,711	25,042	6
5th Post-MD Year	25,028	24,711	26,155	6
6th Post-MD Year	26,043	25,550	27,046	5
		1983-84		
1st Post-MD Year	$20,550	$20,300	$21,200	6
2nd Post-MD Year	21,435	21,150	22,260	6
3rd Post-MD Year	22,275	22,050	23,002	6
4th Post-MD Year	23,216	23,000	23,850	6
5th Post-MD Year	24,151	24,000	24,910	6
6th Post-MD Year	25,121	24,700	25,758	5

Table 39

Dallas, Texas: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
st Post-MD Year	$18,796	$18,500	$19,001	4
nd Post-MD Year	19,678	19,500	20,111	4
rd Post-MD Year	20,911	20,500	21,229	4
th Post-MD Year	21,854	21,500	22,147	4
th Post-MD Year	22,931	22,500	23,261	4
th Post-MD Year	24,142	*	*	2
		1983-84		
st Post-MD Year	$17,935	$17,500	$18,180	4
nd Post-MD Year	18,976	18,500	19,260	4
rd Post-MD Year	19,983	19,500	20,320	4
th Post-MD Year	20,897	20,500	21,200	4
th Post-MD Year	21,936	21,500	22,260	4
th Post-MD Year	23,104	*	*	2

oo few respondents to report data.

Table 40

Detroit, Michigan: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,327	$20,517	$23,480	10
2nd Post-MD Year	22,109	21,365	24,390	10
3rd Post-MD Year	22,954	22,206	25,635	10
4th Post-MD Year	23,819	22,906	26,625	10
5th Post-MD Year	24,713	23,606	28,160	10
6th Post-MD Year	25,566	24,306	29,060	9
		1983-84		
1st Post-MD Year	$20,638	$20,000	$22,575	10
2nd Post-MD Year	21,404	20,850	23,450	10
3rd Post-MD Year	22,203	21,600	24,650	10
4th Post-MD Year	23,118	22,300	25,600	10
5th Post-MD Year	23,991	23,000	27,075	10
6th Post-MD Year	24,750	23,700	27,940	9

Table 41

District of Columbia: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,099	$19,585	$20,594	5
2nd Post-MD Year	22,156	21,736	22,631	5
3rd Post-MD Year	23,367	22,926	23,763	5
4th Post-MD Year	24,611	24,179	24,910	5
5th Post-MD Year	25,880	25,515	26,319	5
6th Post-MD Year	27,036	26,914	27,159	4
		1983-84		
1st Post-MD Year	$19,824	$19,585	$20,594	5
2nd Post-MD Year	21,858	21,756	22,047	5
3rd Post-MD Year	23,028	22,884	23,457	5
4th Post-MD Year	24,182	23,949	24,910	5
5th Post-MD Year	25,319	24,993	26,319	5
6th Post-MD Year	26,180	26,120	26,240	4

Table 42

Hartford, Connecticut: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,082	$20,500	$22,065	6
2nd Post-MD Year	22,280	21,750	23,265	6
3rd Post-MD Year	23,525	22,940	24,515	6
4th Post-MD Year	24,849	24,250	25,919	6
5th Post-MD Year	26,252	25,250	27,115	6
6th Post-MD Year	27,462	26,560	28,215	4
		1983-84		
1st Post-MD Year	$19,920	$19,600	$20,800	5
2nd Post-MD Year	21,065	20,750	21,975	5
3rd Post-MD Year	22,260	21,850	23,200	5
4th Post-MD Year	23,505	23,100	24,375	5
5th Post-MD Year	24,885	24,050	25,725	5
6th Post-MD Year	25,958	*	*	3

*Too few respondents to report data.

Table 43

Houston, Texas: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,266	$19,367	$20,491	5
2nd Post-MD Year	21,619	20,151	21,987	5
3rd Post-MD Year	22,701	21,331	23,044	5
4th Post-MD Year	23,930	22,247	24,351	5
5th Post-MD Year	24,744	23,424	25,324	5
6th Post-MD Year	26,335	24,340	26,859	5
		1983-84		
1st Post-MD Year	$19,639	$19,006	$19,798	5
2nd Post-MD Year	20,949	19,776	21,243	5
3rd Post-MD Year	21,998	20,933	22,265	5
4th Post-MD Year	23,188	21,832	23,528	5
5th Post-MD Year	24,171	22,987	24,468	5
6th Post-MD Year	25,538	23,886	25,951	5

Table 44

Indianapolis, Indiana: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$19,266	$18,864	$20,475	4
2nd Post-MD Year	20,131	19,684	21,475	4
3rd Post-MD Year	20,996	20,504	22,475	4
4th Post-MD Year	21,861	21,324	23,475	4
5th Post-MD Year	22,726	22,144	24,475	4
6th Post-MD Year	23,591	22,964	25,475	4
		1983-84		
1st Post-MD Year	$18,291	$17,838	$19,650	4
2nd Post-MD Year	19,232	18,658	20,955	4
3rd Post-MD Year	20,121	19,478	22,052	4
4th Post-MD Year	21,021	20,298	23,193	4
5th Post-MD Year	21,943	21,118	24,420	4
6th Post-MD Year	22,792	21,938	25,354	4

Table 45

Long Island, New York: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$24,685	$23,000	$25,256	4
2nd Post-MD Year	26,801	25,274	27,425	4
3rd Post-MD Year	28,299	26,618	28,968	4
4th Post-MD Year	29,635	27,846	30,512	4
5th Post-MD Year	30,965	29,075	32,059	4
6th Post-MD Year	32,289	30,303	33,554	4
		1983-84		
1st Post-MD Year	$23,166	$21,835	$23,690	4
2nd Post-MD Year	25,163	24,070	25,578	4
3rd Post-MD Year	26,565	25,350	27,008	4
4th Post-MD Year	27,814	26,520	28,437	4
5th Post-MD Year	29,056	27,690	29,869	4
6th Post-MD Year	30,294	28,860	31,256	4

Table 46

Los Angeles, California: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,356	$19,598	$22,492	9
2nd Post-MD Year	23,858	21,890	25,924	9
3rd Post-MD Year	26,100	23,792	29,447	9
4th Post-MD Year	28,458	25,672	31,915	9
5th Post-MD Year	29,857	27,403	33,591	9
6th Post-MD Year	31,420	28,404	35,691	9
		1983-84		
1st Post-MD Year	$19,479	$18,000	$22,492	9
2nd Post-MD Year	22,971	20,085	25,924	9
3rd Post-MD Year	25,125	22,042	29,447	9
4th Post-MD Year	27,399	23,793	31,562	9
5th Post-MD Year	28,748	25,338	33,591	9
6th Post-MD Year	30,260	26,059	35,691	9

Table 47

Milwaukee, Wisconsin: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$19,875	$19,800	$20,250	6
2nd Post-MD Year	20,382	20,300	20,795	6
3rd Post-MD Year	20,970	20,800	21,825	6
4th Post-MD Year	21,559	21,300	22,856	6
5th Post-MD Year	22,147	21,800	23,884	6
6th Post-MD Year	22,735	22,300	24,912	6
		1983-84		
1st Post-MD Year	$18,204	$18,026	$19,097	6
2nd Post-MD Year	19,152	18,965	20,092	6
3rd Post-MD Year	20,102	19,905	21,087	6
4th Post-MD Year	21,050	20,844	22,083	6
5th Post-MD Year	21,997	21,782	23,076	6
6th Post-MD Year	22,945	22,721	24,070	6

Table 48

Newark, New Jersey: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$22,217	$21,337	$22,995	5
2nd Post-MD Year	23,302	22,222	24,910	5
3rd Post-MD Year	24,332	23,310	25,907	5
4th Post-MD Year	25,341	24,297	27,223	5
5th Post-MD Year	26,182	25,069	28,580	5
6th Post-MD Year	26,541	25,847	27,424	4
		1983-84		
1st Post-MD Year	$20,602	$20,132	$21,693	5
2nd Post-MD Year	22,054	21,397	23,500	5
3rd Post-MD Year	22,977	22,177	24,441	5
4th Post-MD Year	23,933	22,966	25,682	5
5th Post-MD Year	24,897	23,738	26,962	5
6th Post-MD Year	25,290	24,516	27,152	4

Table 49

New York City, New York: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$25,202	$22,562	$28,240	25
2nd Post-MD Year	27,379	24,559	30,540	26
3rd Post-MD Year	29,616	26,471	33,140	26
4th Post-MD Year	30,746	27,636	34,010	26
5th Post-MD Year	31,842	28,509	35,010	26
6th Post-MD Year	33,003	30,051	36,607	24
		1983-84		
1st Post-MD Year	$23,935	$21,758	$27,894	25
2nd Post-MD Year	25,990	23,761	30,180	26
3rd Post-MD Year	28,211	25,700	31,779	26
4th Post-MD Year	29,322	26,847	33,376	26
5th Post-MD Year	30,369	27,724	34,978	26
6th Post-MD Year	31,372	28,451	36,607	24

Table 50

Philadelphia, Pennsylvania: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,485	$20,000	$23,849	14
2nd Post-MD Year	23,086	21,210	25,732	13
3rd Post-MD Year	24,405	22,338	27,268	13
4th Post-MD Year	25,657	23,400	28,933	13
5th Post-MD Year	26,874	24,400	30,318	13
6th Post-MD Year	28,347	24,600	31,702	11
		1983-84		
1st Post-MD Year	$20,397	$18,400	$22,932	15
2nd Post-MD Year	22,001	20,200	24,742	14
3rd Post-MD Year	23,222	21,275	26,219	14
4th Post-MD Year	24,444	22,400	27,820	14
5th Post-MD Year	25,601	23,400	29,152	14
6th Post-MD Year	26,991	23,650	30,483	11

Table 51

Pittsburgh, Pennsylvania: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,955	$20,283	$22,800	9
2nd Post-MD Year	22,353	21,828	24,100	9
3rd Post-MD Year	23,970	23,580	25,600	9
4th Post-MD Year	25,475	25,116	27,100	9
5th Post-MD Year	27,259	27,024	28,500	9
6th Post-MD Year	29,159	28,584	30,400	8
		1983-84		
1st Post-MD Year	$20,015	$19,503	$21,700	9
2nd Post-MD Year	21,474	20,988	23,200	9
3rd Post-MD Year	23,129	22,749	24,800	9
4th Post-MD Year	24,835	24,624	26,100	9
5th Post-MD Year	26,581	26,196	27,400	9
6th Post-MD Year	28,542	27,480	29,693	8

Table 52

Providence, Rhode Island: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,021	$20,540	$22,068	4
2nd Post-MD Year	21,871	21,390	22,916	4
3rd Post-MD Year	23,082	22,500	24,399	4
4th Post-MD Year	24,421	23,925	25,454	4
5th Post-MD Year	26,255	25,553	27,866	4
6th Post-MD Year	27,919	*	*	3
		1983-84		
1st Post-MD Year	$20,118	$19,750	$21,220	4
2nd Post-MD Year	20,931	20,555	22,035	4
3rd Post-MD Year	22,001	21,632	23,105	4
4th Post-MD Year	23,372	23,003	24,475	4
5th Post-MD Year	24,938	24,570	26,040	4
6th Post-MD Year	26,883	26,335	27,825	4

*Too few respondents to report data.

Table 53

San Francisco, California: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$21,061	$19,416	$23,500	6
2nd Post-MD Year	23,423	21,525	26,000	6
3rd Post-MD Year	25,200	23,100	28,000	6
4th Post-MD Year	26,946	24,675	30,000	6
5th Post-MD Year	28,664	26,250	32,000	6
6th Post-MD Year	29,956	27,300	33,500	4
		1983-84		
1st Post-MD Year	$20,188	$18,500	$22,650	8
2nd Post-MD Year	22,382	20,500	24,900	8
3rd Post-MD Year	24,254	22,000	27,150	8
4th Post-MD Year	25,940	23,500	28,950	8
5th Post-MD Year	27,493	25,000	30,500	8
6th Post-MD Year	28,437	26,000	32,100	6

Table 54

Seattle, Washington: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$19,640	$19,620	$19,671	5
2nd Post-MD Year	20,818	20,796	20,852	5
3rd Post-MD Year	21,996	21,972	22,033	5
4th Post-MD Year	23,174	23,148	23,215	5
5th Post-MD Year	24,352	24,324	24,396	5
6th Post-MD Year	25,530	25,500	25,577	5
		1983-84		
1st Post-MD Year	$18,384	$18,384	$18,384	5
2nd Post-MD Year	19,488	19,488	19,488	5
3rd Post-MD Year	20,592	20,592	20,592	5
4th Post-MD Year	21,696	21,696	21,696	5
5th Post-MD Year	22,800	22,800	22,800	5
6th Post-MD Year	23,904	23,904	23,904	5

Table 55

St. Louis, Missouri: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,750	$20,580	$21,583	6
2nd Post-MD Year	21,786	21,600	22,668	6
3rd Post-MD Year	22,860	22,600	23,796	6
4th Post-MD Year	24,058	23,826	24,986	5
5th Post-MD Year	25,109	25,020	25,466	5
6th Post-MD Year	26,212	25,988	26,268	5
		1983-84		
1st Post-MD Year	$20,018	$19,788	$20,768	6
2nd Post-MD Year	21,122	20,778	22,385	6
3rd Post-MD Year	22,091	21,816	22,993	6
4th Post-MD Year	23,132	22,908	23,684	5
5th Post-MD Year	24,289	24,060	24,809	5
6th Post-MD Year	25,449	25,254	25,746	5

Table 56

All Other Cities: Housestaff Stipends for 1984-85 and 1983-84, by Year of Training

Year of Training	Mean	Lowest	Highest	Number of Hospitals
		1984-85		
1st Post-MD Year	$20,097	$12,595	$26,280	133
2nd Post-MD Year	21,422	13,239	29,477	133
3rd Post-MD Year	22,592	14,767	31,266	133
4th Post-MD Year	23,748	16,295	33,013	131
5th Post-MD Year	24,936	17,851	35,093	126
6th Post-MD Year	25,792	19,340	37,735	93
		1983-84		
1st Post-MD Year	$19,315	$12,595	$26,280	138
2nd Post-MD Year	20,576	13,239	28,000	138
3rd Post-MD Year	21,717	14,767	30,000	138
4th Post-MD Year	22,877	16,295	32,000	135
5th Post-MD Year	24,043	17,851	34,000	131
6th Post-MD Year	24,751	19,340	35,691	94

Table 57

Hospitals Accepting Clerkship Applicants from Non-LCME Accredited Medical Schools
1984-85

	% of Hospitals	Number Accepted
Nationwide (N=328)	16.5%	692
Geographic Region		
Northeastern (N=130)	17.7	345
Southern (N=60)	11.7	145
Midwestern (N=95)	20.0	181
Western (N=43)	11.6	21
Affiliation Relationship		
University-Owned (N=55)	16.4	148
Major Affiliate (N=228)	15.4	409
Limited Affiliate (N=39)	23.1	127
Unaffiliated (N=6)	16.7	8
Hospital Ownership		
State-Owned (N=40)	17.5	126
Municipally-Owned (N=27)	14.8	56
Church-Owned (N=44)	13.6	71
Other, Nonprofit (N=159)	20.8	434
Veterans Administration (N=56)	7.1	5
Hospital Bed Size		
399 or Fewer (N=87)	12.6	60
400-549 (N=98)	19.4	156
550-699 (N=58)	12.1	179
700 or More (N=85)	20.0	297

Table 58

Hospitals Requiring Clerkship Fee By Affiliation Status
Nationwide
1984-85

Required Clerkship	Answering Yes	Fee Range
Affiliated Medical Schools	3.1%	$20-8,000
Other LCME-Accredited Schools	1.4	20-2,000
Medical Schools Outside the U.S. and Canada	2.5	25-2,000
Elective Clerkships		
Affiliated Medical Schools	5.4	$15-5,500
Other LCME-Accredited Schools	7.0	10-2,000
Medical Schools Outside the U.S. and Canada	5.9	20-2,000

CHAPTER II

HOUSESTAFF BENEFITS AND POLICIES

This chapter addresses the provision of health benefits, housing and meals, vacation time, and other benefits provided to house officers. The results are examined according to the same groupings used to analyze housestaff stipends.

HEALTH BENEFITS (Tables 59-64)

The health benefits included in this year's survey are hospitalization (including inpatient physician services and major medical, and at least a portion of outpatient services), dental services, prescription drugs, hospital employee health service programs, and psychiatric counseling or psychosocial support.

Hospitalization

Hospitalization remains the most common benefit provided to housestaff and dependents. Ninety percent of the respondents this year indicated this benefit was provided to housestaff and dependents, and nine percent to housestaff only - with 75 percent providing the benefit at no cost to the housestaff, and 54 percent at no cost to the dependents.

The display of this information shows significant variation in this benefit only in the Southern region, where 30 percent of the hospitals provide hospitalization to residents only (Table 60). When analyzed according to affiliation, those with a university-owned relationship reported the lowest percentage offering hospitalization benefits to housestaff and dependents, or 86 percent. Again, the fact that the state-owned hospitals are predominant within the university-owned category obscures determination of which category influences this analysis. State-owned institutions also report the smallest percentage providing hospitalization to both housestaff and dependents-83 percent. An analysis of the bed-size distribution of this question does not illustrate any remarkable differences.

Dental

Three hundred and thirty-four hospitals responded to this question, with approximately 72 percent indicating they do provide dental benefits; 59 percent provided this benefit to housestaff and dependents, and 13 percent to housestaff only. These figures are consistent with those reported for 1983-84.

As in the past, this benefit shows considerable variation by region and affiliation. Thirty-eight percent of Southern hospitals responding to the survey indicated they do provide this benefit, while 84 percent of the responding hospitals in the West offer dental benefits. University-owned hospitals provide dental benefits in 52 percent of responding institutions.

Drug Prescriptions

Nearly 65 percent of responding hospitals reported providing prescription drug benefits to housestaff and dependents, and 11 percent to housestaff only. With 69 more hospitals responding to this question than responded in 1983-84, the percentage of hospitals providing this benefit decreased from 93 to 75 percent.

Hospital Employee Health Services

Approximately 50 percent of responding hospitals provide employee health services to housestaff only. These services are provided at the hospital either at no cost or at a reduced rate. The provision of this benefit is relatively consistent across all variables analyzed except in the Western region, where such health services are not provided in 42 percent of responding hospitals.

Psychiatric Counseling

The provision of psychiatric counseling is provided nationwide in slightly more than 50 percent of responding institutions. Limited affiliates provide this benefit to housestaff more often (74 percent) and Southern hospitals the least often (39 percent), although this percentage has increased from 1983-84, when 27 percent of Southern region hospitals reported providing psychiatric counseling.

Amount of Premium Contribution

Although 75 percent of responding hospitals pay the full cost of health insurance premiums for their housestaff, only 54 percent assume the cost for the dependents as well, with 20 percent paying no costs for dependents. The Southern region, university-owned, and VA hospitals support the full costs of these premiums least often, or 59 percent, 65 percent, and 38 percent respectively (Table 64). Nationally, 97 percent of responding hospitals pay some cost of health insurance premium for housestaff, and approximately 80 percent support some of these costs for dependents.

NON-HEALTH BENEFITS (Tables 65-75)

The non-health benefits analyzed for this survey include: life insurance, disability insurance, parking, housing, meals, vacation time, and time granted to attend seminars. With the exception of vacation and seminar time, respondents were asked to identify whether they provided the full costs of these benefits, part of the cost, or none of the cost.

Respondents were asked whether the benefits offered to residents at their institutions varied from those offered to all employees. Thirty-one percent stated the benefits were identical. The 67 percent (or 101 hospitals) with differing benefit packages indicated the most common differences were in the provision of health and life insurance coverage, especially relating to eligibility requirements. The second most commonly reported difference, in 88 hospitals, was in the provision of a meal allowance. Also noted were: long term disability insurance option, parking, differences in vacation/sick accrual, housing, ineligibility for pension plans, provision of

lab coats and laundry services, and differences due to employee status of housestaff versus all other employees.

Parking

Eighty-six percent of hospitals responding to the survey indicated that they paid all or part of the costs for first year housestaff parking expenses. University-owned hospitals provided payment the least often, or in 62 percent of the hospitals, and in the Western region the least often, in approximately 73 percent of the hospitals.

Life Insurance

Approximately 83 percent of responding hospitals either pay the full cost or subsidize part of the cost of life insurance for first year housestaff. Little variation in the provision of this benefit is evident except for VA hospitals where expense is paid in full in 22 percent of responding hospitals.

It is more prevalent for hospitals not to cover any of these costs in the West than in any other region, 28 percent of respondents so indicated.

Disability Insurance

More than 66 percent of responding hospitals pay for some or all of the costs of disability insurance nationwide. The full cost of this benefit is most commonly paid in Northeastern region hospitals, and by hospitals with a limited affiliation with a medical school. By affiliation, 46 percent of university-owned hospitals pay the full cost of disability insurance.

Housing

As in the past, housing is not commonly provided to first year housestaff by responding hospitals. Seventy-six percent of these hospitals do not provide this benefit nationwide. In the Northeastern region, nine percent of responding institutions provide housing at no cost, and 24 percent at reduced cost. Cumulatively, this 33 percent is the largest positive response to this question by region. Hospitals that are limited affiliates also more commonly provide this benefit. Forty-two percent supported some percent of housing costs.

Meals

Sixty-nine percent of respondents provide meals to first year housestaff, when "on-call", and 28 percent provide this service at all times when the house officer is on duty in the hospital. Municipally-owned institutions more often pay the full cost ofmeals to residents and interns when on duty (46 percent of respondents), paying the full cost to those "on-call" 50 percent of the time, the lowest percentage by ownership. Hospitals in the Midwest cover some percent of the cost of meals for housestaff "on-call", or 90 perecent of respondents. Similarily, VA hospitals provide some portion of this benefit in 92 percent of responding VA hospitals.

Vacation

Forty-seven percent of responding hospitals provide two weeks or less of vacation to first year housestaff, 34 percent provide three weeks, and 19 percent provide four weeks or more. In the Midwest, 45 percent of responding hospitals allow three weeks vacation leave per first year house officer. State-owned hospitals more often offer three weeks than other categories, in 40 percent of responding institutions, but 28 percent of municipally-owned hospitals responding to the survey indicated the provision of four weeks or more of granted vacation leave annually.

Leave Granted to Attend Seminars

Nationally, 78 percent of responding hospitals allow time off so that housestaff may attend seminars or other educational events, with 68 percent allowing more than five days. Proportionally fewer VA and municipally-owned hospitals do not allow time off for such activities, or 34 and 32 percent, respectively.

Providing a Fee Discount for Certain Benefits

Most hospitals responding to this question indicated they do not use a fee discount system as part of their benefit package. The 27 percent that do have such a system are primarily in the Southern region, (32 percent); university-owned, (37 percent); and municipally-owned, (39 percent). The above referenced hospital groupings, southern, university-owned, and municipally-owned, often report low benefit coverage when compared to other hospitals.

Table 59

Health Benefits Provided to
Housestaff and Dependents, Nationwide
1984-85

Benefit	Benefit for	Number of Hospitals	Percentage
Hospitalization	Housestaff and Dependents	300	90%
	Housestaff Only	31	9
	Not Provided	3	1
	TOTAL	334	100%
Dental	Housestaff and Dependents	196	59%
	Housestaff Only	42	13
	Not Provided	96	29
	TOTAL	334	100%
Drug Prescriptions	Housestaff and Dependents	214	64%
	Housestaff Only	38	11
	Not Provided	82	25
	TOTAL	334	100%
Hospital Employee Health Service	Housestaff and Dependents	98	29%
	Housestaff Only	159	48
	Not Provided	77	23
	TOTAL	334	100%
Psychiatric Counseling	Housestaff	173	52%
	Not Provided	160	48
	TOTAL	333	100%

Table 60

Health Benefits Provided to
Housestaff and Dependents, By Geographic Region
1984-85

Benefit	Benefit for	Geographic Region: Northeastern (N=132)	Southern (N=60)	Midwestern (N=99)	Western (N=43)	Nationwide (N=334)
Hospitalization	Housestaff and Dependents	93%	68%	96%	95%	90%
	Housestaff Only	6	30	3	5	9
	Not Provided	1	2	1	0	1
	TOTAL	100%	100%	100%	100%	100%
Dental	Housestaff and Dependents	67%	20%	64%	74%	59%
	Housestaff Only	14	18	9	9	13
	Not Provided	19	62	27	16	29
	TOTAL	100%	100%	100%	100%	100%
Drug Prescriptions	Housestaff and Dependents	64%	47%	71%	72%	64%
	Housestaff Only	11	27	6	5	11
	Not Provided	25	27	23	23	25
	TOTAL	100%	100%	100%	100%	100%
Hospital Employee Health Service	Housestaff and Dependents	32%	18%	31%	33%	29%
	Housestaff Only	56	53	42	26	48
	Not Provided	12	28	26	42	23
	TOTAL	100%	100%	100%	100%	100%
Psychiatric Counseling	Housestaff	50%	39%	62%	57%	52%
	Not Provided	50	61	39	43	48
	TOTAL	100%	100%	100%	100%	100%

Table 61

Health Benefits Provided to
Housestaff and Dependents, By Affiliation Relationship
1984-85

Benefit	Benefit for	Affiliation Relationship: University-Owned (N=56)	Major Affiliate (N=233)	Limited Affiliate (N=39)	Nationwide (N=334)
Hospitalization	Housestaff and Dependents	86%	89%	97%	90%
	Housestaff Only	14	9	3	9
	Not Provided	0	1	0	1
	TOTAL	100%	100%	100%	100%
Dental	Housestaff and Dependents	45%	58%	77%	59%
	Housestaff Only	7	15	8	13
	Not Provided	48	27	15	29
	TOTAL	100%	100%	100%	100%
Drug Prescriptions	Housestaff and Dependents	66%	63%	67%	64%
	Housestaff Only	13	12	8	11
	Not Provided	21	25	26	25
	TOTAL	100%	100%	100%	100%
Hospital Employee Health Service	Housestaff and Dependents	30%	27%	41%	29%
	Housestaff Only	45	50	41	48
	Not Provided	25	24	18	23
	TOTAL	100%	100%	100%	100%
Psychiatric Counseling	Housestaff	60%	46%	74%	52%
	Not Provided	40	54	26	48
	TOTAL	100%	100%	100%	100%

Table 62
Health Benefits Provided to Housestaff and Dependents, By Hospital Ownership

Benefit	Benefit for	State-Owned (N=41)	Municipally-Owned (N=28)	Church-Owned (N=44)	Other, Nonprofit (N=172)	Veterans Administration (N=47)	Nationwide (N=334)
Hospitalization	Housestaff and Dependents	83%	89%	93%	94%	77%	90%
	Housestaff Only	17	11	7	5	19	9
	Not Provided	0	0	0	1	4	1
	TOTAL	100%	100%	100%	100%	100%	100%
Dental	Housestaff and Dependents	51%	57%	68%	62%	43%	59%
	Housestaff Only	2	11	14	15	13	13
	Not Provided	46	32	18	23	45	29
	TOTAL	100%	100%	100%	100%	100%	100%
Drug Prescriptions	Housestaff and Dependents	71%	54%	61%	66%	57%	64%
	Housestaff Only	10	14	14	11	11	11
	Not Provided	20	32	25	23	32	25
	TOTAL	100%	100%	100%	100%	100%	100%
Hospital Employee Health Service	Housestaff and Dependents	24%	11%	39%	34%	19%	29%
	Housestaff Only	44	57	46	48	45	48
	Not Provided	32	32	16	17	36	23
	TOTAL	100%	100%	100%	100%	100%	100%
Psychiatric Counseling	Housestaff	57%	44%	63%	55%	33%	52%
	Not Provided	43	56	38	45	67	48
	TOTAL	100%	100%	100%	100%	100%	100%

Table 63

Health Benefits Provided to
Housestaff and Dependents, By Hospital Bed Size
1984-85

Benefit	Benefit for	Hospital Bed Size: 399 or Fewer (N=89)	400-549 (N=100)	550-699 (N=57)	700 or More (N=88)	Nationwide (N=334)
Hospitalization	Housestaff and Dependents	91%	91%	90%	88%	90%
	Housestaff Only	9	8	9	11	9
	Not Provided	0	1	2	1	1
	TOTAL	100%	100%	100%	100%	100%
Dental	Housestaff and Dependents	60%	59%	54%	60%	59%
	Housestaff Only	9	13	16	14	13
	Not Provided	32	28	30	26	29
	TOTAL	100%	100%	100%	100%	100%
Drug Prescriptions	Housestaff and Dependents	71%	57%	65%	65%	64%
	Housestaff Only	9	11	12	14	11
	Not Provided	20	32	23	22	25
	TOTAL	100%	100%	100%	100%	100%
Hospital Employee Health Service	Housestaff and Dependents	28%	33%	25%	30%	29%
	Housestaff Only	43	49	49	50	48
	Not Provided	29	18	26	21	23
	TOTAL	100%	100%	100%	100%	100%
Psychiatric Counseling	Housestaff	47%	51%	53%	58%	52%
	Not Provided	53	49	48	43	48
	TOTAL	100%	100%	100%	100%	100%

Table 64

Hospital Contribution to Health Insurance Premium
for Housestaff and Dependents
1984-85

	Percentage of Hospitals Contributing					
	Housestaff			Dependents		
	Full Cost of Premium	Part of Cost	None of Cost	Full Cost of Premium	Part of Cost	None of Cost
Nationwide (N=342)	75%	22%	3%	54%	27%	20%
Geographic Region						
Northeastern (N=134)	78	19	2	64	24	12
Southern (N=65)	59	37	5	19	39	42
Midwestern (N=98)	82	16	2	63	26	11
Western (N=45)	71	22	7	52	19	29
Affiliation Relationship						
University-Owned (N=54)	65	32	4	35	48	17
Major Affiliate (N=242)	74	23	4	54	24	22
Limited Affiliate (N=40)	93	5	3	75	15	10
Hospital Ownership						
State-Owned (N=40)	65	33	3	33	49	18
Municipally-Owned (N=29)	79	17	3	46	15	39
Church-Owned (N=44)	93	5	2	68	18	14
Other, Nonprofit (N=169)	84	14	2	67	24	8
Veterans Administration (N=58)	38	52	10	20	31	49
Hospital Bed Size						
399 or Fewer (N=92)	64	31	5	42	36	22
400-549 (N=101)	85	13	2	63	20	17
550-699 (N=60)	75	22	3	54	22	24
700 or More (N=89)	73	25	2	55	29	17

Table 65

Non-Health Benefits Provided to
First Year Housestaff, Nationwide
1984-85

Benefit	Hospital Contributes	Number of Hospitals	Percentage
Life Insurance	Full Cost	232	68%
	Part of Cost	50	15
	None of Cost	61	18
	TOTAL	343	100%
Disability	Full Cost	193	59%
	Part of Cost	25	8
	None of Cost	111	34
	TOTAL	329	100%
Parking	Full Cost	231	69%
	Part of Cost	56	17
	None of Cost	50	15
	TOTAL	337	100%
Housing	Full Cost	22	7%
	Part of Cost	56	18
	None of Cost	241	76
	TOTAL	319	100%

Table 66

Non-Health Benefits Provided to First Year Housestaff,
By Geographic Region
1984-85

Benefit	Hospital Contributes	Geographic Region: Northeastern (N=138)	Southern (N=62)	Midwestern (N=100)	Western (N=43)	Nationwide (N=343)
Life Insurance	Full Cost	74%	63%	69%	51%	68%
	Part of Cost	11	19	14	21	15
	None of Cost	15	18	17	28	18
	TOTAL	100%	100%	100%	100%	100%
Disability	Full Cost	69%	43%	59%	46%	59%
	Part of Cost	5	17	7	5	8
	None of Cost	26	40	34	49	34
	TOTAL	100%	100%	100%	100%	100%
Parking	Full Cost	63%	74%	76%	61%	69%
	Part of Cost	25	17	7	12	17
	None of Cost	12	9	17	28	15
	TOTAL	100%	100%	100%	100%	100%
Housing	Full Cost	9%	11%	4%	3%	7%
	Part of Cost	24	5	17	15	18
	None of Cost	67	84	79	83	76
	TOTAL	100%	100%	100%	100%	100%

Table 67

Non-Health Benefits Provided to First Year Housestaff,
By Affiliation Relationship
1984-85

Benefit	Hospital Contributes	Affiliation Relationship: University-Owned (N=56)	Major Affiliate (N=241)	Limited Affiliate (N=40)	Nationwide (N=343)
Life Insurance	Full Cost	55%	70%	73%	68%
	Part of Cost	20	16	3	15
	None of Cost	25	15	25	18
	TOTAL	100%	100%	100%	100%
Disability	Full Cost	46%	60%	68%	59%
	Part of Cost	17	7	3	8
	None of Cost	37	33	30	34
	TOTAL	100%	100%	100%	100%
Parking	Full Cost	39%	75%	77%	69%
	Part of Cost	23	16	15	17
	None of Cost	39	10	8	15
	TOTAL	100%	100%	100%	100%
Housing	Full Cost	4%	6%	17%	7%
	Part of Cost	9	18	25	18
	None of Cost	87	76	58	76
	TOTAL	100%	100%	100%	100%

Table 68

Non-Health Benefits Provided to First Year Housestaff,
By Hospital Bed Size
1984-85

Benefit	Hospital Provides	Hospital Bed Size: 399 or Fewer (N=87)	400-549 (N=102)	550-699 (N=61)	700 or More (N=93)	Nationwide (N=343)
Life Insurance	Full Cost	64%	77%	59%	67%	68%
	Part of Cost	16	10	13	19	15
	None of Cost	20	14	28	14	18
	TOTAL	100%	100%	100%	100%	100%
Disability	Full Cost	62%	56%	57%	60%	59%
	Part of Cost	9	7	3	9	8
	None of Cost	29	37	40	31	34
	TOTAL	100%	100%	100%	100%	100%
Parking	Full Cost	64%	67%	74%	71%	69%
	Part of Cost	21	15	15	16	17
	None of Cost	15	18	11	14	15
	TOTAL	100%	100%	100%	100%	100%
Housing	Full Cost	1%	6%	7%	12%	7%
	Part of Cost	10	19	18	22	18
	None of Cost	89	75	75	66	76
	TOTAL	100%	100%	100%	100%	100%

Table 69

Non-Health Benefits Provided to First Year Housestaff,

By Hospital Ownership, 1984-85

Benefit	Hospital Contributes	Hospital Ownership: State-Owned (N=41)	Municipally-Owned (N=27)	Church-Owned (N=43)	Other, Nonprofit (N=172)	Veterans Administration (N=58)	Nationwide (N=343)
Life Insurance	Full Cost	54%	67%	81%	83%	22%	68%
	Part of Cost	17	11	5	3	55	15
	None of Cost	29	22	14	14	22	8
	TOTAL	100%	100%	100%	100%	100%	100%
Disability	Full Cost	37%	42%	71%	74%	30%	59%
	Part of Cost	17	15	5	4	9	8
	None of Cost	46	42	24	22	61	34
	TOTAL	100%	100%	100%	100%	100%	100%
Parking	Full Cost	40%	78%	77%	67%	86%	69%
	Part of Cost	19	15	19	22	0	17
	None of Cost	42	7	5	12	14	15
	TOTAL	100%	100%	100%	100%	100%	100%
Housing	Full Cost	5%	18%	8%	8%	0%	7%
	Part of Cost	8	18	30	22	4	18
	None of Cost	88	64	63	71	96	76
	TOTAL	100%	100%	100%	100%	100%	100%

Table 70

Non-Health Benefits: Provision of Meals

1984-85

	ON CALL				WHEN WORKING			
	Hospitals Responding	Full Cost	Reduced Cost	None of Cost	Hospitals Responding	Full Cost	Reduced Cost	None of Cost
Nationwide	242	69%	12%	19%	265	28%	26%	46%
Geographic Region								
Northeastern	92	65	12	23	109	25	31	44
Southern	50	62	14	24	50	22	30	48
Midwestern	70	77	13	10	75	33	23	44
Western	30	77	3	20	31	36	10	55
Affiliation Relationship								
University-Owned	44	59	11	30	43	14	12	74
Major Affiliate	174	70	12	18	185	25	30	45
Limited Affiliate	21	86	10	5	33	58	24	18
Hospital Ownership								
State-Owned	33	64	9	27	32	16	13	72
Municipally-Owned	14	50	21	29	26	46	31	23
Church-Owned	25	76	8	16	32	44	38	19
Other, Nonprofit	121	65	14	21	131	28	33	39
Veterans Administration	48	85	6	8	43	14	5	81
Hospital Bedsize								
399 or Fewer	69	65	15	20	69	25	23	52
400-549	67	76	9	15	75	31	29	40
550-699	41	71	15	15	51	29	29	41
700 or More	65	66	9	25	70	27	23	50

Table 71

Annual Vacation Provided to First Year Housestaff
1984-85

	Two Weeks or Less	Three Weeks	Four Weeks or More	Total
Nationwide (N=342)	47%	34%	19%	100%
Geographic Region				
Northeastern (N=134)	41	26	33	100
Southern (N=64)	63	31	6	100
Midwestern (N=100)	47	45	8	100
Western (N=44)	46	36	18	100
Affiliation Relationship				
University-Owned (N=56)	39	46	14	100
Major Affiliate (N=240)	50	30	20	100
Limited Affiliate (N=40)	50	38	38	100
Hospital Ownership				
State-Owned (N=43)	44	40	16	100
Municipally-Owned (N=29)	41	31	28	100
Church-Owned (N=43)	49	35	16	100
Other, Nonprofit (N=168)	45	39	16	100
Veterans Administration (N=57)	60	14	26	100
Hospital Bed Size				
399 or Fewer (N=90)	47	37	17	100
400-549 (N=100)	50	30	20	100
550-699 (N=60)	47	38	15	100
700 or More (N=92)	46	33	22	100

Table 72

Annual Vacation Provided to Second Year Housestaff

1984-85

	Two Weeks or Less	Three Weeks	Four Weeks or More	Total
Nationwide (N=339)	16%	59%	25%	100%
Geographic Region				
Northeastern (N=133)	16	47	37	100
Southern (N=63)	24	62	14	100
Midwestern (N=99)	8	73	19	100
Western (N=44)	21	57	23	100
Affiliation Relationship				
University-Owned (N=56)	18	61	21	100
Major Affiliate (N=237)	14	59	27	100
Limited Affiliate (N=40)	23	55	23	100
Hospital Ownership				
State-Owned (N=43)	21	61	19	100
Municipally-Owned (N=29)	21	38	41	100
Church-Owned (N=43)	14	67	19	100
Other, Nonprofit (N=167)	11	64	25	100
Veterans Administration (N=55)	22	47	31	100
Hospital Bed Size				
399 or Fewer (N=90)	13	67	20	100
400-549 (N=100)	12	63	25	100
550-699 (N=60)	25	53	22	100
700 or More (N=89)	16	49	35	100

Table 73

Time Allotted House Officers for Attending Seminars

1984-85

	Less than 5 days	5 days	More Than 5 days	Total
Nationwide (N=143)	8%	24%	68	100%
Geographic Region				
Northeastern (N=47)	11	38	51	100
Southern (N=23)	4	13	83	100
Midwestern (N=56)	5	21	74	100
Western (N=17)	18	12	70	100
Affiliation Relationship				
University-Owned (N=14)	7	21	72	100
Major Affiliate (N=104)	7	23	70	100
Limited Affiliate (N=23)	17	26	57	100
Hospital Ownership				
State-Owned (N=12)	17	16	67	100
Municipally-Owned (N=7)	29	14	57	100
Church-Owned (N=24)	8	29	63	100
Other, Nonprofit (N=84)	10	26	64	100
Veterans Administration (N=16)	0	19	81	100
Hospital Bed Size				
399 or Fewer (N=39)	10	21	69	100
400-549 (N=48)	7	25	68	100
550-699 (N=24)	4	29	67	100
700 or More (N=32)	12	25	63	100

Table 74

Hospitals Allowing Additional Time Off for Seminars
1984-85

	Time Allowed	No Time Allowed	Total
Nationwide (N=339)	78%	22%	100%
Geographic Region			
Northeastern (N=132)	77	24	100
Southern (N=65)	77	23	100
Midwestern (N=99)	82	18	100
Western (N=43)	77	23	100
Affiliation Relationship			
University-Owned (N=53)	72	28	100
Major Affiliate (N=241)	77	23	100
Limited Affiliate (N=39)	92	8	100
Hospital Ownership			
State-Owned (N=42)	74	26	100
Municipally-Owned (N=28)	68	32	100
Church-Owned (N=43)	81	19	100
Other, Nonprofit (N=163)	85	15	100
Veterans Administration (N=61)	66	34	100
Hospital Bed Size			
399 or Fewer (N=90)	73	27	100
400-549 (N=101)	83	17	100
550-699 (N=59)	81	19	100
700 or More (N=89)	75	25	100

Table 75

Hospitals Providing Benefits by a Fee Discount System*

1984-85

	Percent Providing	Number of Hospitals
Nationwide (N=319)	27%	87
Geographic Region		
Northeastern (N=127)	29	37
Southern (N=60)	32	19
Midwestern (N=91)	21	19
Western (N=41)	29	12
Affiliation Relationship		
University-Owned (N=51)	37	19
Major Affiliate (N=229)	26	60
Limited Affiliate (N=34)	24	8
Hospital Ownership		
State-Owned (N=37)	30	11
Municipally-Owned (N=26)	39	10
Church-Owned (N=38)	34	13
Other, Nonprofit (N=159)	32	51
Veterans Administration (N=57)	2	1
Hospital Bed Size		
399 or Fewer (N=84)	27	23
400-549 (N=91)	30	27
550-699 (N=57)	18	10
700 or More (N=87)	31	27

*The question was asked as follows: "Of the above benefits [hospitalization, dental services, prescription drugs, and hospital employee health programs], are any provided by a fee discount system? If yes, please describe:"

CHAPTER III

HOSPITAL EXPENDITURES (Tables 76-80)

Hospitals responding to the COTH Survey of Housestaff Stipends, Benefits, and Funding are annually requested to identify the component sources used to pay the costs of stipends and fringe benefits paid to housestaff. Tables 76-77 report this data by average gross expenditures, and Table 78 displays the data as a percentage of the hospital operating budget as reported on the survey. The mean cost of the residency program in 1983-84 was $3,722,012, and $525,979 for clinical fellow programs. This represents an increase over 1982-83 reported means of 16.17 percent for residency programs, and an 8 percent increase in the mean cost of clinical fellowship programs. Although, the overall response rate to this question was greater this year than last, 343 as opposed to 277; the number able to separate this financial information to specifically identify clinical fellows costs decreased from 137 in 1982-83 to 115 in 1983-84. This information is not disaggregated by full time equivalents (FTEs) by year of training and readers are cautioned that increases or decreases in expenditures could be due to a combination of at least three factors: 1) an increase in the number of positions; 2) large numbers of trainees in the later years of their residency or fellowships being, therefore, more highly paid; and/or 3) a change in the level or cost of benefits provided.

Tables 79-80 illustrates the mean and median ratios of fringe benefits to stipend expenditures for residents and fellows. This "fringe rate" is greatest in the Northeastern hospitals; those with limited affiliations; and in church-owned and hospitals with "other" ownership arrangements.

SOURCES OF FUNDING (Tables 81-88)

Data identifying sources of funding for residents' stipends and benefits are similar to 1982-83, in that 81.1 percent of the funds supporting residents came from patient revenues, and 60.92 percent of patient revenue dollars supported clinical fellows. The remarkable difference in reported funding source in this report for the last two reporting years as compared to all previous years was due in large part to the misinterpretation of this question on the part of a larger institution. In previous years, all their funding was reported as "municipal-earmarked" although this was not, in fact, the case. This data, while artifically inflating the "municipal" percentage, also deflated the patient revenue share in years prior to 1982.

As in the past, university-owned institutions received a higher percentage of state appropriations than hospitals under other affiliation agreements, or 10.8 percent. Juxtaposed are institutions with limited affiliations, where over 90 percent of the revenue needed to pay the costs of residents comes from patient revenues, and 89.5 percent needed for clinical fellows comes from this source.

As expected, state-owned institutions receive a large proportion of revenues used to pay hospital costs of housestaff stipends from state appropriations, or 18.63 percent for residents, and 7.1 percent for fellows. These hospitals use patient revenues to pay 58.59 percent of the housestaff stipends and benefits in the institution, and 15.54 percent of the costs of clinical fellows.

Three displays have been deleted from this year's survey. Last year they appeared as figures 4 and 6, and Table 81, relating to nationwide clinical fellow and resident stipends and benefits. In attempting to describe the sources of funding nationwide, data from COTH VA respondents to the survey were included. Due to the heavy response rate from VA institutions, the graphic displays overstated the VA share of nationwide funding support.

Table 76

Average Expenditures for Residents' Stipends and Fringe Benefits
1983-84

	Number of Hospitals	Expenditures for Residents' Stipends & Fringe Benefits	
		Mean	Median
All Responding Hospitals	343	$3,722,012	$2,670,910
Geographic Region			
Northeastern	136	3,825,949	2,721,403
Southern	64	3,820,505	2,789,244
Midwestern	99	3,400,951	2,343,416
Western	44	3,979,881	2,981,968
Affiliation Relationship			
University-Owned	56	6,402,923	6,510,965
Major Affiliate	243	3,316,074	2,316,867
Limited Affiliate	38	2,221,659	1,789,700
Hospital Ownership			
State-Owned	42	5,876,376	5,755,750
Municipally-Owned	28	5,201,999	4,291,190
Church-Owned	42	2,709,269	2,200,000
Other, Nonprofit	166	3,731,909	2,449,000
Veterans Administration	63	2,383,504	2,046,320
Hospital Bedsize			
399 or Fewer	90	2,396,265	1,724,783
400-549	100	3,236,983	2,422,610
550-699	62	3,462,069	2,789,244
700 or More	91	5,743,295	4,425,903

Table 77

Average Expenditures for Clinical Fellows' Stipends and Fringe Benefits
1983-84

	Number of Hospitals	Expenditures for Fellows' Stipends & Fringe Benefits	
		Mean	Median
All Responding Hospitals	115	$ 525,979	$274,245
Geographic Region			
Northeastern	59	545,078	352,523
Southern	14	501,518	188,571
Midwestern	26	495,582	224,000
Western	16	526,354	274,245
Affiliation Relationship			
University-Owned	17	1,040,058	927,557
Major Affiliate	85	461,092	263,332
Limited Affiliate	11	304,004	205,200
Hospital Ownership			
State-Owned	14	1,020,007	927,557
Municipally-Owned	9	394,747	230,186
Church-Owned	15	165,799	144,000
Other, Nonprofit	58	591,087	290,651
Veterans Administration	18	325,265	228,658
Hospital Bedsize			
399 or Fewer	37	450,651	278,261
400-549	32	474,433	230,186
550-699	23	389,874	228,658
700 or More	23	854,983	505,240

Table 78

Residents' Stipends and Benefits as a Percentage of Hospital's Total Operating Budget, 1983-84

	Number of Hospitals	Percentage of Hospital Budget			
		25th Percentile	Median	Mean	75th Percentile
All Responding Hospitals	313	2.2%	3.3%	3.5%	4.6%
Geographic Region					
Northeastern	123	2.5	3.4	3.6	4.7
Southern	58	2.3	3.2	3.8	5.0
Midwestern	90	2.0	3.0	3.1	4.0
Western	42	2.0	3.2	3.6	5.0
Affiliation Relationship					
University-Owned	50	3.6	4.4	4.5	5.6
Major Affiliate	222	2.2	3.2	3.4	4.4
Limited Affiliate	36	1.9	2.4	2.7	3.0
Hospital Ownership					
State-Owned	38	3.0	4.5	4.6	5.8
Municipally-Owned	25	3.0	4.0	4.3	5.6
Church-Owned	39	1.7	2.0	2.7	4.0
Other, Nonprofit	149	2.0	3.0	3.2	4.0
Veterans Administration	61	2.9	3.7	3.8	4.7
Hospital Bed Size					
399 or Fewer	82	2.5	3.2	3.5	4.3
400-549	92	2.1	3.1	3.4	4.3
550-699	56	1.9	3.2	3.4	4.3
700 or More	83	2.0	3.4	3.6	5.0

Table 79

Ratio of Fringe Benefits to Stipend Expenditures for Residents
1984-85

	Number of Hospitals	Mean	Median
Nationwide	342	.166	.156
Geographic Region			
Northeastern	135	.177	.177
Southern	64	.146	.133
Midwestern	98	.171	.150
Western	45	.148	.135
Affiliation			
University	56	.152	.135
Major	243	.164	.154
Limited	37	.185	.174
Hospital Ownership			
State	42	.142	.135
Municipal	29	.165	.125
Church	42	.183	.169
Other	166	.187	.180
Veterans Administration	62	.114	.106
Hospital Bed Size			
399 or Fewer	90	.170	.156
400-549	99	.161	.166
550-699	62	.158	.140
700 or More	91	.171	.154

Table 80

Ratio of Expenditures on Fringes to Stipends for Fellows
1984-85

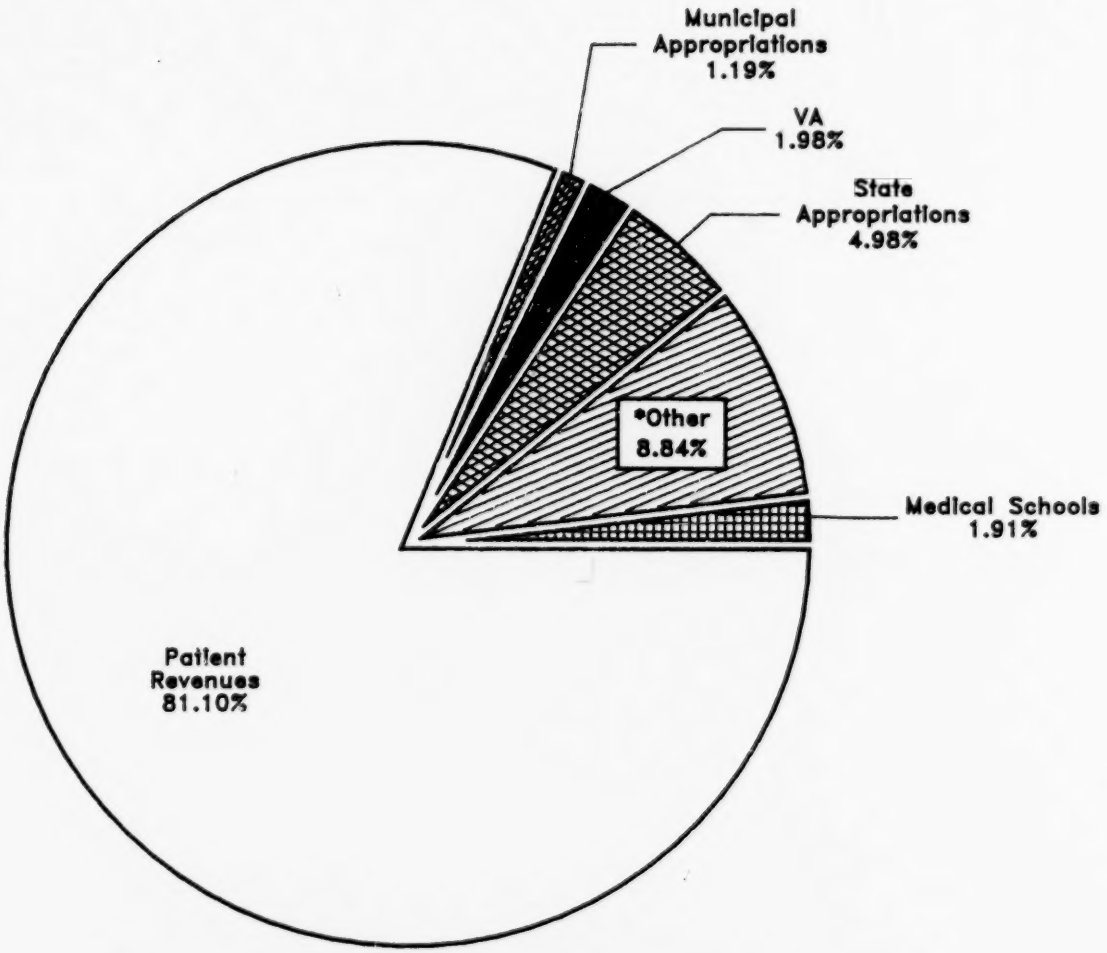
	Number of Hospitals	Mean	Median
Nationwide	114	.163	.149
Geographic Region			
Northeastern	58	.174	.170
Southern	14	.118	.098
Midwestern	25	.168	.141
Western	17	.155	.134
Affiliation			
University	16	.124	.130
Major	86	.168	.142
Limited	10	.180	.180
Hospital Ownership			
State	13	.136	.130
Municipal	10	.212	.108
Church	15	.154	.149
Other	58	.182	.180
Veterans Administration	18	.103	.100
Hospital Bed Size			
399 or Fewer	37	.185	.165
400-549	31	.155	.150
550-699	22	.168	.135
700 or More	24	.135	.100

Table 81

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84 NATIONWIDE (Excluding VA Hospitals)

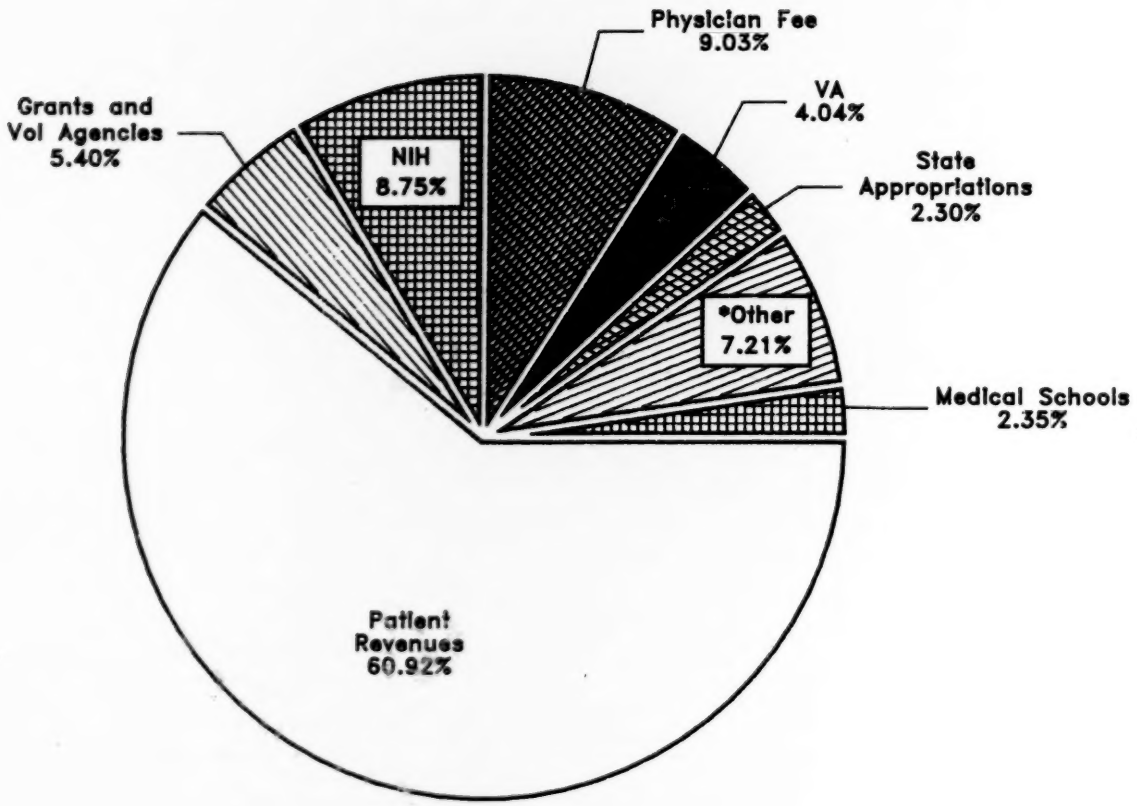
	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	81.10%	60.92%
State Appropriations Earmarked for Housestaff Expenses	4.98	2.30
Municipal Appropriations Earmarked for Housestaff Expenses	1.19	0.64
Veterans Administration Appropriations	1.98	4.04
Physician Fee Revenue	0.60	9.03
Medical School/University Funds	1.91	2.35
NIH	0.29	8.75
Other Federal Agencies	0.27	0.88
Endowment Income	0.03	0.52
Foundation Grants, Voluntary Agencies	0.43	5.40
Other	7.23	5.18
TOTAL	100.00%	100.00%
Number of Hospitals	280	97

Figure 4:
Residents Stipends and Benefits: Sources of Funding
– Excluding VA Hospitals –
1983 – 1984



*Includes Physician Fee, NIH, Federal Agencies, Grants and Voluntary Agencies, and Endowments

Figure 5:
Clinical Fellows Stipends and Benefits: Sources of Funding
– Excluding VA Hospitals –
1983 – 1984



*Includes Endowments, Municipal Appropriations, and Federal Agencies

Table 82

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84
UNIVERSITY-OWNED (Excluding VA Hospitals)

	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	66.88%	28.10%
State Appropriations Earmarked for Housestaff Expenses	10.80	5.73
Municipal Appropriations Earmarked for Housestaff Expenses	0.00	0.00
Veterans Administration Appropriations	3.22	10.70
Physician Fee Revenue	1.03	18.38
Medical School/University Funds	3.83	3.51
NIH	0.20	15.58
Other Federal Agencies	0.47	1.91
Endowment Income	0.07	0.09
Foundation Grants, Voluntary Agencies	0.75	7.72
Other	12.74	8.29
TOTAL	100.00%	100.00%
Number of Hospitals	56	17

Table 83

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84
MAJOR AFFILIATE (Excluding VA Hospitals)

	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	87.31%	75.21%
State Appropriations Earmarked for Housestaff Expenses	2.57	0.73
Municipal Appropriations Earmarked for Housestaff Expenses	1.37	1.04
Veterans Administration Appropriations	1.63	0.94
Physician Fee Revenue	0.32	4.30
Medical School/University Funds	1.12	1.99
NIH	0.38	6.08
Other Federal Agencies	0.20	0.27
Endowment Income	0.00	0.76
Foundation Grants, Voluntary Agencies	0.32	4.76
Other	4.76	3.91
TOTAL	100.00%	100.00%
Number of Hospitals	181	67

Table 84

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84
LIMITED (Excluding VA Hospitals)

	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	90.30%	89.59%
State Appropriations Earmarked for Housestaff Expenses	0.39	0.00
Municipal Appropriations Earmarked for Housestaff Expenses	3.92	0.00
Veterans Administration Appropriations	0.00	0.00
Physician Fee Revenue	0.85	6.89
Medical School/University Funds	0.33	0.00
NIH	0.08	0.00
Other Federal Agencies	0.05	1.49
Endowment Income	0.00	0.37
Foundation Grants, Voluntary Agencies	0.05	0.00
Other	4.03	1.66
TOTAL	100.00%	100.00%
Number of Hospitals	43	13

Table 85

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84
STATE-OWNED

	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	58.59%	15.54%
State Appropriations Earmarked for Housestaff Expenses	18.63	7.10
Municipal Appropriations Earmarked for Housestaff Expenses	0.00	0.00
Veterans Administration Appropriations	5.25	13.24
Physician Fee Revenue	1.53	18.78
Medical School/University Funds	4.07	4.34
NIH	0.25	19.29
Other Federal Agencies	0.89	2.36
Endowment Income	0.10	0.11
Foundation Grants, Voluntary Agencies	1.03	9.56
Other	9.68	9.69
TOTAL	100.00%	100.00%
Number of Hospitals	42	14

Table 86

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84
MUNICIPALLY-OWNED

	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	71.29%	69.22%
State Appropriations Earmarked for Housestaff Expenses	1.27	1.27
Municipal Appropriations Earmarked for Housestaff Expenses	8.55	9.77
Veterans Administration Appropriations	2.78	0.00
Physician Fee Revenue	0.00	0.00
Medical School/University Funds	1.80	0.00
NIH	0.05	0.00
Other Federal Agencies	0.06	0.00
Endowment Income	0.00	0.00
Foundation Grants, Voluntary Agencies	0.03	0.00
Other	14.17	19.75
TOTAL	100.00%	100.00%
Number of Hospitals	28	9

Table 87

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84

CHURCH-OWNED

	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	91.90%	85.30%
State Appropriations Earmarked for Housestaff Expenses	3.62	0.00
Municipal Appropriations Earmarked for Housestaff Expenses	0.00	0.00
Veterans Administration Appropriations	0.40	0.00
Physician Fee Revenue	0.00	0.80
Medical School/University Funds	0.58	0.00
NIH	0.05	0.00
Other Federal Agencies	0.16	0.00
Endowment Income	0.00	0.00
Foundation Grants, Voluntary Agencies	0.07	5.20
Other	3.23	8.70
TOTAL	100.00%	100.00%
Number of Hospitals	42	15

Table 88

Percentage Distribution of Funding Sources Used to Pay Hospital Costs of Housestaff Stipends and Fringe Benefits, 1983-84
OTHER, NONPROFIT

	Source of Revenue	
Funding Source	Residents	Clinical Fellows
Patient Revenues and General Operating Appropriations	90.36%	77.24%
State Appropriations Earmarked for Housestaff Expenses	0.67	0.58
Municipal Appropriations Earmarked for Housestaff Expenses	0.16	0.00
Veterans Administration Appropriations	0.77	0.92
Physician Fee Revenue	0.48	6.51
Medical School/University Funds	1.32	1.94
NIH	0.41	5.91
Other Federal Agencies	0.10	0.42
Endowment Income	0.01	0.78
Foundation Grants, Voluntary Agencies	0.36	4.25
Other	5.36	1.45
TOTAL	100.00%	100.00%
Number of Hospitals	166	58

COTH SURVEY OF HOUSESTAFF STIPENDS, BENEFITS, AND FUNDING

April 1984

Name of Hospital _____

City/State _____

Membership Code # _____

A. Housestaff Funding

1. What is the cash stipend per year?

Are 1984–85 stipends estimated? YES _____ NO _____

	1984–85	1983–84
1st Post-MD Year	$ _____	$ _____
2nd Post-MD Year	$ _____	$ _____
3rd Post-MD Year	$ _____	$ _____
4th Post-MD Year	$ _____	$ _____
5th Post-MD Year	$ _____	$ _____
6th Post-MD Year	$ _____	$ _____

2. Is the cash stipend the same across all *specialties*? YES _____ NO _____

If no, which specialties have stipends that are higher or lower than the figures reported above? _____

_____

3. In which four programs will there be the greatest change in the number of resident positions offered in 1983–84?

Programs to Increase	# Positions Added	Programs to Decrease	# Positions Subtracted
(1) _____	_____	(3) _____	_____
(2) _____	_____	(4) _____	_____

4. How many full-time equivalent (f.t.e.) residents and fellows does the hospital have? a. residents _____ b. fellows _____

5. What sources are used to pay the costs of the 1983–84 stipends and fringe benefits for housestaff at your hospital? (If you cannot separate the data by resident/fellow please use column 1. and check this box. ☐)

	1.) Resident/Interns	2.) Clinical Fellows
a. Patient revenues and general operating appropriations for the hospital	$ _____	$ _____
b. State appropriations earmarked for housestaff expenses	$ _____	$ _____
c. Municipal appropriations earmarked for housestaff expenses	$ _____	$ _____
d. Veterans Administration appropriations	$ _____	$ _____
e. Physician fee revenue	$ _____	$ _____
f. Medical school/university funds	$ _____	$ _____
g. NIH	$ _____	$ _____
h. Other federal agencies	$ _____	$ _____
i. Endowment income	$ _____	$ _____
j. Foundation grants/voluntary agencies	$ _____	$ _____
k. Other (specify) _____	$ _____	$ _____
l. Other (specify) _____	$ _____	$ _____
M. TOTAL	$ _____	$ _____

6. Based on the amount enumerated in question 5 above, what is the estimated total dollars to be spent on stipends and fringe benefits for housestaff in your hospital in 1983–84?

	Interns/Residents	Clinical Fellows
a. Stipends	$ _____	$ _____
b. Fringe Benefits (including FICA and other insurance)	$ _____	$ _____
C. TOTAL (Should be the same as 5 M above)	$ _____	$ _____

7. What percentage of the *hospital's* total operating budget is spent for housestaff stipends and benefits? Interns/Residents _____ %
Clinical Fellows _____ %

B. Housestaff Benefits

8. What percentage of the costs for health insurance premiums does your hospital contribute? Housestaff _____ %
Dependents _____ %

Check those health benefits covered:

	Housestaff	Dependents
a. Hospitalization including inpatient physician services and major medical including at least a portion of outpatient services	_____	_____
b. Dental services	_____	_____
c. Prescription drugs	_____	_____
d. Hospital employee health service program	_____	_____

9. Of the above benefits, are any provided by a fee discount system? Yes ____ No ____ If yes, please describe: _____

10. Please check below to indicate whether the following benefits are provided to 1st year house officers:

	Hospital Provides at No Cost	Reduced Rate	Hospital Does Not Provide
a. Life Insurance			
b. Disability Insurance			
c. Parking			
d. Housing			
e. Meals (1) when working			
(2) only when on call			

11. a. Are the benefits offered to residents in your institution identical to those offered full time employees? YES ____ NO ____

b. Please describe any benefit provided residents that is not part of the benefit package offered to employees: _____

12. Does your hospital offer psychiatric counseling or psychosocial support at *no cost* to housestaff? YES ____ NO ____

13. a. How many weeks do house officers receive as vacation during a year?
(1) 1st year house officers: ____ weeks
(2) 2nd year house officers: ____ weeks

b. Do house officers receive additional time for attending seminars?
YES ____ NO ____ If yes, how much time is allowed? _____

14. a. For residents taking maternity leave, does your hospital have a written policy regarding the fulfillment of educational responsibilities? YES ____ NO ____

b. What entity monitors a written or informal maternity leave policy to verify that acceptable training requirements are met?
Medical School Administration ____
Clinical Departments ____
Housestaff Office ____
Training Program Director ____
Other (please describe) _____

C. Other Issues

15. How many of the house officers at your hospital belong to these minorities?

	Black American		American Indian		Mexican American		Mainland Puerto Rico	
	1st Yr	Total	1st Yr	Total	1st Yr	Total	1st Yr	Total
Family Practice								
Medical Specialties								
Surgical Specialties								
Other Specialties								

16. Does your hospital require a charge, fee, or payment for taking a clerkship?
a. Required Clerkships:
____ Yes for affiliated med. school, specify amount $ ____
____ Yes for other LCME-accredited schools, specify amount $ ____
____ Yes for medical schools outside the U.S. and Canada, specify amount $ ____
____ No

b. Elective clerkships:
____ Yes for affiliated med. school, specify amount $ ____
____ Yes for other LCME-accredited schools, specify amount $ ____
____ Yes for med. schools outside the U.S. and Canada, specify amount $ ____
____ No

17. Do you accept clerkship applicants from Non-LCME accredited institutions?
YES ____ NO ____ Number accepted 1982–83 Academic Year: ____

THANK YOU

18. Person to contact for questions about this questionnaire: _____
Area Code and Telephone Number: _____

Please complete and return by *June 1, 1984* to:

Department of Teaching Hospitals, Association of American Medical Colleges
One Dupont Circle, N.W., Suite # 200, Washington, DC 20036
(202) 828-0496

Appendix B

Response Rate for 1984 Survey of Housestaff Stipends, Benefits, and Funding

Hospital Category	Number of Responding Hospitals	Number of COTH Members	Response Rate
Total Membership	355	433	82%
Geographic Region			
Northeastern	140	172	81
Southern	67	84	80
Midwestern	101	118	86
Western	47	52	90
Affiliation Relationship			
University-Owned	58	64	91
Major Affiliate	251	303	83
Limited Affiliate	46*	56**	82
Hospital Ownership			
State-Owned	43	47	92
Municipally-Owned	29	37	94
Church-Owned	45	52	87
Other, Non-Profit	173	209	83
Veterans Administration	65	74	85
Hospital Bed Size			
399 or Fewer	96	113	85
400 - 549	103	120	86
550 - 699	62	77	81
700 or More	94	118	80

* Includes six unaffiliated hospitals.

** Includes seven unaffiliated hospitals.

Appendix C

Dollar and Percentage Increases in Mean First-Year Housestaff Stipends 1969-1985

Academic Year	Mean Stipend	Dollar Increase Over Previous Year	Percentage Increase Over Previous Year
1969-70	$ 7,325	--	--
1970-71	8,115	$ 790	10.8%
1971-72	9,198	1,083	13.3
1972-73	9,698	500	5.4
1973-74	10,114	416	4.3
1974-75	10,692	578	5.7
1975-76	11,685	993	9.2
1976-77	12,371	686	5.9
1977-78	13,145	774	6.3
1978-79	13,904	759	5.8
1979-80	14,811	907	6.5
1980-81	16,017	1,206	8.1
1981-82	17,301	1,284	8.0
1982-83	18,910	1,609	9.3
1983-84	19,868	958	5.1
1984-85	20,808	940	4.7

Appendix D

CHANGES IN RESIDENCY PROGRAMS FOR THE 1984-85 YEAR

By Nancy Seline
Staff Associate

Under the recently implemented Medicare Prospective Payment System, Congress included a pass-through of the indirect medical education costs and a resident-to-bed adjustment as a proxy for factors that would increase the costs of patient care in teaching hospitals, including the inability of the DRG system to adequately distinguish among patients with differences in severity of their illnesses. Since the pass-through includes Medicare's share of the resident's stipends, and because the resident-to-bed adjustment increases hopsital payments, some have speculated that teaching hospitals may increase their numbers of residents to increase payments from Medicare.

To determine if teaching hospitals have responded to these alleged incentives to increase residents, data from the COTH Survey of Housestaff Stipends, Benefits, and Funding, 1984 were analyzed. Among other questions, this survey asked members of the Council of Teaching Hospitals to identify the two residency programs in which there would be the largest increase and the two programs in which there would be the largest decrease in number of positions offered. The responses to this question have been aggregated and are reported in the Tables I-III. Three-hundred twenty-eight of the 435 members of the COTH (75.4 percent) had responded to the housestaff survey at the time of this analysis, and 261 of those responding (79.6 percent) completed this question.

Because of the way in which the question was asked, it is possible that the responses underestimate the changes in residency positions. Hospitals in which more than two residency programs were increasing or decreasing were not able to report the full extent of the changes in their residency programs. to ascertain whether the limitation of two responses resulting in the reported data significantly underestimating the actual changes in residency programs, the individual hospital responses were examined to determine: 1) how many hospitals had exhausted the space available for reporting either increases or decreases, and therefore, possibly had more changes to report; and 2) of the hospitals that had exhausted the space, how many had reported significant changes in the two programs they were able to show on the form, and therefore, potentially had other significant changes in the residency programs that they were unable to report. (For purposes of this examination, a significant change was defined as a change of five or more residents.)

One hundred sixty-three hospitals (62.5 percent) had space remaining on the questionnaire and are assumed to have reported all of their changes. Ninety-eight (37.5 percent) of the hospitals had exhausted the available space for reporteing either increasing or decreasing programs, or for both. Among the 98, only 8 (3.1 percent of all respondents) were found to have reported increases or decreases in two programs in which the change in the number of residents

for each program was 5 or more. Since this was such a small portion of the respondents, the potential questionnaire results are believed to accurately describe residency changes.

Changes in Numbers, Types of Residents Examined

Using the responses to the Housestaff Survey, the following questions can be explored:

- o are hospitals responding to the Prospective Payment System by increasing their number of residents?
- o are hospitals changing the type of residency programs they offer?

To answer the first question, the responses to this survey have been tabulated and comparisons made between the net changes in residency positions among the hospitals paid under the Prospective Payment System, those in waivered states, the VA hospitals, and children's hospitals. Since the waivered state hospitals, children's hospitals, and the VA hospitals are not subject to the Prospective Payment System, they essentially act as control groups against which changes in the Prospective Payment System (PPS) hospitals can be compared.

As shown in Table I, 261 hospitals responded to this question on the Housestaff Stipend Survey. Almost 60 percent of the respondents were in prospective payment system hospitals, and 18.8 percent were in both the waivered state and VA categories. So few of the children's hospitals repsonded to this question that it is difficult to draw any conclusions from their responses; however, the data from the children's hospital have been displayed in the table.

Approximately the same proportion of PPS and VA hospitals reported overall increases in the number of residency positions in their institutions (48.7 and 49.0 percent, respectively). Just 36.7 percent of the hospitals in waivered states reported that they expected to have overall increases in their residency programs, and almost a quarter (24.5 percent) reported they would experience overall decreases in the number of residents in their institution. This decrease compares to 14.1 percent of the PPS hospitals and 16.3 percent of the VA hospitals.

While Table I shows that a significant portion of the hospitals were reporting absolute changes in their residency numbers, Table II shows that the changes they expected to make were relatively small. Among all of the responding hospitals, those indicating that there would be an overall increase in the number of residency positions reported an aggregate increase of 458 positions. These were offset by the overall decreases of 294 positions in the other hospitals, resulting in a net increase of 164 (0.6 percent) in the number of residents in reporting hospitals. Of the four groups examined, the net resident increase in children's the four groups examined, the net resident increase in children's hospitals (2.5 percent) and VA hospitals (1.2 percent) exceeded the net increase in hospitals under prospective payment (0.7 percent). Hospitals in waivered states showed virtually no change in the number of residents.

Thus, Table II shows that hospitals under PPS are not adding residents to increase Medicare payments. To examine the possibility that the hospital level data masks shifts among specialties, additional analyses were conducted.

Changes By Specialty

When examined by specialty, the data do reveal some differences among the various disciplines. Programs in the anesthesiology, emergency medicine, family practice, psychiatry, neurology, radiology, and the transitional year show aggregate net increases of ten or more positions among the respondent institutions. The residency programs in obstetrics and gynecology and general surgery showed total aggregate net decreases of 24 and 38 positions, respectively.

The large increases in anesthesiology and emergency medicine result from changes in the residency review requirements. In 1977, the Residency Review Committee (RRC) for anesthesiology approved an additional year (a core clinical year), in the anesthesiology program. As these positions are added, increases in the number of anesthesiology residents reported are expected throughout the early 1980s. Similarly, emergency medicine is a new residency training program. Residency training programs in this discipline were first approved in August of 1982, and new programs and new positions are still being added.

The changes in the other disciplines shown may also be attributable to factors other than financial implications of the payment system under which the hospital operates. These might include changes in the demographics of the hospital region, changes in the residency requirements, changes in the hospital medical staff, or competition from other hospitals for training programs. With these findings, it appears unlikely that the Medicare Prospective Payment System has altered the type of residencies provided by hospitals.

Conclusion

While the first year data do not support the hypothesis that teaching hospitals have increased the number of residents under prospective payment, it is not clear what will happen in future years. It is certain that changes in the numbers and types of residents in prospective payment system hospitals will be closely watched during the next few years in an attempt to discern the effects of the payment system.

Table I

Hospitals Reporting Changes in Residency Programs*

	PPS	Waivered State	VA	Children's	Total
1. Number of Hospitals Responding to Question	156	49	49	7	261
	(59.8%)	(18.8%)	(18.8%)	(2.7%)	(100%)
2. Number of Hospitals Reporting:					
a. overall increases	76	18	24	5	123
b. overall decreases	22	12	8	0	42
c. no net change	58	19	17	2	96
3. Percentage of Hospitals Reporting:					
a. overall increases	48.7%	36.7%	49.0%	71.4%	47.1%
b. overall decreases	14.1%	24.5%	16.3%	--	16.1%
c. no net change	37.2%	38.8%	34.7%	28.6%	36.8%

*The question was asked as follows: "In which four programs will there be the greatest change in the number of resident positions offered."

Table II

Number of Residents' Positions Reported Changing

	PPS	Waivered State	VA	Children's*	Total
1. Number of Hospitals Responding to Question**	27,502	8,838	3,871	448	40,659
	(67.6%)	(21.7%)	(9.5%)	(1.1%)	(100%)
2. Number of Hospitals Reporting:					
a. overall increases	295	94	57	12	458
b. overall decreases	93	91	12	0	196
c. no net change	202	3	45	12	262
	(77.1%)	(1.1%)	(17.1%)	(4.8%)	(100%)
3. Percent Change of Residents in Responding Hospitals					
a. overall increases	1.1%	1.1%	1.5%	2.5%	1.1%
b. overall decreases	.3%	1.0%	.3%	--	.5%
c. no net change	.7%	--	1.2%	2.5%	.6%

* Probably includes data from distinct part providers.

** Some hospitals neglected to report # of F.T.E. residents; the 1984 COTH Directory was used as the alternate source for this information.

Table III

Net Changes in Number of Residents by
Specialty for All Reporting Hospitals

Specialty	Positions Increasing	Positions Decreasing	Net Change
Anesthesiology	106	-13	93
Dermatology	7	- 3	4
Emergency Medicine	34	*	34
Family Practice	27	-14	13
General Internal Medicine			
-Cardiovascular Dis.	1	*	1
-Hematology	1	*	1
-Infectious Disease	*	- 1	- 1
-Nephrology	*	- 1	- 1
-Pulmonary Disease	2	- 2	0
Neurology	12	- 1	11
Nuclear Medicine	1	- 1	0
OB/GYN	16	-40	-24
-Gynecologic Oncology	*	- 1	- 1
Ophthalmology	*	- 5	- 5
Pathology	18	-15	3
Pediatrics	59	-63	- 4
-Cardiology	*	- 2	- 2
-Nephrology	1	*	- 1
Physical Medicine & Rehab.	9	- 1	8
Preventive Medicine	1	*	1
Psychiatry	43	-15	28
-Child Psych	4	*	4
Radiology	18	- 8	10
-Diagnostic	1	- 2	- 1
-Therapeutic	*	- 8	- 8
General Surgery	62	-100	-38
-Neurological	2	- 2	0
-Orthopedic	11	- 3	8
Otolaryngology	12	- 3	9
Plastic Surgery	4	- 2	2
Thoracic Surgery	1	*	1
Urology	1	- 5	- 4
Dental	2	- 1	1
Geriatrics	1	*	1
Transitional Year	26	- 5	21

* No Response

Appendix E

Ratios of Residents to Beds
1983-84

	Median Ratio
Nationwide (N=330)	.203
Geographic Region	
Northeastern (N=130)	.199
Southern (N=63)	.190
Midwestern (N=95)	.190
Western (N=42)	.249
Affiliation Relationship	
University-Owned (N=53)	.530
Major Affiliate (N=233)	.190
Limited Affiliate (N=38)	.128
Hospital Ownership	
State-Owned (N=38)	.536
Municipally-Owned (N=27)	.305
Church-Owned (N=43)	.128
Other, Nonprofit (N=162)	.207
Veterans Administration (N=58)	.136
Hospital Bed Size	
399 or Fewer (N=91)	.237
400-549 (N=92)	.191
550-699 (N=57)	.173
700 or More (N=90)	.196

Appendix F

Ratios of Post-M.D. Trainees to Beds (Includes Fellows)
1983-84

	Median Ratio
Nationwide (N=329)	.219
Geographic Region	
Northeastern (N=129)	.219
Southern (N=63)	.207
Midwestern (N=95)	.203
Western (N=42)	.259
Affiliation Relationship	
University-Owned (N=53)	.579
Major Affiliate (N=232)	.204
Limited Affiliate (N=38)	.163
Hospital Ownership	
State-Owned (N=38)	.598
Municipally-Owned (N=27)	.316
Church-Owned (N=43)	.139
Other, Nonprofit (N=161)	.223
Veterans Administration (N=58)	.137
Hospital Bed Size	
399 or Fewer (N=90)	.259
400-549 (N=92)	.213
550-699 (N=57)	.186
700 or More (N=90)	.203

Appendix G

Minorities as a Percentage of Total Residents
1983-84

Nationwide	Number of Hospitals	Mean	Median
Geographic Region	336	5.98%	3.08%
Northeastern	135	5.29	2.86
Southern	62	6.01	3.03
Midwestern	96	6.79	4.42
Western	43	6.32	2.70
Affiliation Relationship			
University-Owned	54	6.27	3.52
Major Affiliate	239	6.10	3.02
Limited Affiliate	37	3.98	2.56
Hospital Ownership			
State-Owned	40	5.49	3.03
Municipally-Owned	28	8.37	5.24
Church-Owned	43	6.53	4.62
Other, Nonprofit	167	5.16	3.01
Veterans Administration	57	7.27	2.59
Hospital Bed Size			
399 or Fewer	93	6.83	2.81
400-549	94	6.26	3.09
550-699	58	4.33	2.60
700 or More	91	5.88	3.18

Appendix H

Minorities as a Percentage of Total Residents and Fellows
1983-84

Nationwide	Number of Hospitals	Mean	Median
Geographic Region	335	5.53%	2.90%
Northeastern	134	4.80	2.56
Southern	62	5.80	2.52
Midwestern	96	6.28	4.23
Western	43	5.72	2.06
Affiliation Relationship			
University-Owned	54	5.64	3.03
Major Affiliate	238	5.65	2.70
Limited Affiliate	37	3.75	2.38
Hospital Ownership			
State-Owned	40	4.97	2.90
Municipally-Owned	28	7.89	4.72
Church-Owned	43	6.13	4.26
Other, Nonprofit	166	4.82	2.56
Veterans Administration	57	6.44	2.22
Hospital Bed Size			
399 or Fewer	92	6.33	2.63
400-549	94	5.81	2.90
550-699	58	4.05	2.58
700 or More	91	5.36	3.07

Northeastern Region
CANADA
WASHINGTON
MONTANA
NORTH DAKOTA
MINNESOTA
L. Superior
MAINE
VERMONT
NEW HAMPSHIRE
OREGON
IDAHO
WESTERN REGION INCLUDING ALASKA AND HAWAII
MIDWEST-GREAT PLAINS REGION
WISCONSIN
MICHIGAN
L. Huron
L. Ontario
NEW YORK
MASSACHUSETTS
RHODE ISLAND
CONNECTICUT
SOUTH DAKOTA
L. Michigan
L. Erie
PENNSYLVANIA
NEW JERSEY
WYOMING
IOWA
Missouri R.
NEBRASKA
OHIO
MARYLAND
DELAWARE
Washington District of Columbia
ILLINOIS
INDIANA
WEST VIRGINIA
VIRGINIA
NEVADA
UTAH
COLORADO
Ohio R.
KENTUCKY
KANSAS
MISSOURI
NORTH CAROLINA
CALIFORNIA
Colorado R.
TENNESSEE
OKLAHOMA
ARKANSAS
Mississippi R.
SOUTH CAROLINA
ARIZONA
NEW MEXICO
SOUTHERN REGION
GEORGIA
ATLANTIC OCEAN
MISSISSIPPI
ALABAMA
TEXAS
LOUISIANA
FLORIDA
PACIFIC OCEAN
Rio Grande
MEXICO
Gulf of Mexico